

STANDARD WARRANTY FORM



NOTE: All minimum required information should be provided by the Purchasing company before the claim will be handled by Sandfirden Technics B.V. For the required information please consult also the user's manual. This form can be filled in by hand or digital using Acrobat Reader. Email this form to warranty@sandfirden.nl

*Required information

Required information to be defined by the Purchasing company*

Purchasing company claiming : _____
Name of ship / Installation : _____
Date of failure : _____
Machine type : _____
Machine serial number : _____
Machine running hours : _____

Detailed description*

- Complaint and/or damage
- Possible cause
- Circumstances

Customer Request*

Additional information (this can speed up your claim request)

Sandfirden Technics B.V. project nr. : _____
Name of the person claiming : _____
Correspondence e-mail address : _____
Claim number customer : _____

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Reference number(s) of failed parts, which are requested to be send by Sandfirden Technics B.V. (failed parts must be send back to per address Sandfirden Technics B.V., Haventerrein 1, 1779 GS Den Oever (The Netherlands) Ref. purchasing company claiming and claim number):

Pos.	Part description	Part no.	Qty.
1.			
2.			
3.			
4.			
5.			
6.			

Required information to be defined by Sandfirden Technics:

Date claim received : _____

Warranty coordinator : _____

Claim number : _____

Opinion (Sandfirden Technics B.V. is responsible / not responsible incl. reason) :

Action(s) to be undertaken :

Overview of failed parts returned by the Purchaser:

Pos.	Part description	Part no.	Qty.
1.			
2.			
3.			
4.			
5.			
6.			

Date opinion returned to the Purchaser : _____

Status of this claim : _____

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The Netherlands

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