## **WARRANTY CLAIM**

Speed up the processing of your claim by fully completing this form.

CAMSO
ROAD FREE COMPANY

Date of the claim:			Dealer:								
Contact:											
Dealer #:				Phone #:							
Installation performed by:	Dea	ller		Owne	r						
Number of hours of use: Date sold:											
Track system serial #:							-				
Installed on the following v	/ehicle	e: 	vea	ur/make/	model						
Please attach: Origi	Original customer invoice Photos of damaged parts (					3 (3)					
Date of incident:											
Description of problem:											

## AFFECTED FRAME

ATV/UTV



**DTS 129** 



List of the parts required to carry out the repairs:

PART #	DESCRIPTION	QTY	PART #	DESCRIPTION	QTY
1.		,	5.		,
2.			6.		
3.			7.		
4.			8.		

All form must be completed by an authorized Camso dealer and return by email to dealer.atv@camso.co Remember to attach the original customer invoice, photos and indicate the track system serial #. Incomplete claims will take longer to process.