

# solo<sup>®</sup> WARRANTY CLAIM REQUEST

Dealer claim #: \_\_\_\_\_

Repair Date \_\_\_\_\_

Chain Saw

Sprayer/Mistblower

Air Blower

Trimmer

**Warranty Performed By:**

Firm Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ FAX # \_\_\_\_\_

Technician \_\_\_\_\_

Unit purchased from \_\_\_\_\_

Customer complaint \_\_\_\_\_

**Equipment serviced:**

Model # \_\_\_\_\_

Serial # \_\_\_\_\_

Hours used \_\_\_\_\_

How used  Commercial

Homeowner

Purchase date \_\_\_\_\_

Describe claimed defect in material or workmanship \_\_\_\_\_

Corrective Work Performed \_\_\_\_\_

Labor Time \_\_\_\_\_

**Parts Used**

Quantity	Part # / Description	List	Total
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Warranty Credit	
Parts	_____
Less _____ % discount	_____
Sub Total	_____
Labor	_____
Misc.	_____
Total	_____

Location of replaced parts  Dealer  Distributor  Factory Retain parts until notified.

Owner's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Phone # \_\_\_\_\_

Is owner using Solo oil?  Yes  No

Signature \_\_\_\_\_

Distributor Approval \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Phone # \_\_\_\_\_

Signature \_\_\_\_\_

**NOTE:**  
*Mr. Dealer - pistons, cylinders, and ignitions must accompany claims for failures in these parts.*

SOLO's warranty policy is to replace or repair the malfunctioning parts found defective in material or workmanship. SOLO will not replace the entire piece of equipment. Please contact SOLO, Inc. before making repairs that exceed 50% of dealer cost of equipment.

Factory Use Only