Warranty Claim Form

KÄRCHER

1 Karcher Claim No:

Repair Date: Drop Off Date: Condition Found:

2 Customer Serviced

Name:

Address:

City:

State: Zip:

Phone:

3 **Stens - Customer No:**

Name:

Address:

City:

State: Zip:

Phone:

4 Model/Type:

Product No:

Serial No:

5 Date of Sale:

Seller:

Proof of Purchase Attached: ☐

6

A) Part(s) Which Caused Initial Failure			***(Karcher Use)***
Part	Qty.	Desc.	Parts Credit

B) Part(s) Damaged Because of Failure			***(Karcher Use)***
Part	Qty.	Desc.	Parts Credit

7

Labor Performed: (reference flat rate repair schedule)	Minutes	***(Karcher Use)*** Credit Amt.
		Total Minutes

Karcher Use Only:

Total Labor Credit: $

Warranty Parts: Approved ☐ Not Approved ☐

Warranty Labor: Approved ☐ Not Approved ☐

Reasons:

Authorized by: Date Authorized: