

# FORM CLO1 (RA/EU)

## WARRANTY CLAIM FORM

①  
DATE OF CLAIM:

CLAIM ID:

RETAILER INFORMATION	
RETAILER NAME ②	
ADDRESS	
CITY	
STATE	
ZIPCODE	

OWNER INFORMATION		
OWNER NAME ③		
ADDRESS		
CITY	STATE	ZIPCODE
<b>OWNERS DECLARATION</b> <small>I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THE FOREGOING STATEMENTS ARE CORRECT, THAT I AM THE OWNER OF THE PRODUCT(S) PRESENTED FOR CLAIM AND THAT THE PRODUCT(S) DESCRIBED WAS (WERE) NOT INVOLVED IN ANY ACCIDENT, PERSONAL INJURY, CONSEQUENTIAL DAMAGE OR OTHER LOSS. I ACCEPT THIS ADJUSTMENT IN LIEU OF ALL FURTHER CLAIMS. I UNDERSTAND THAT THE PRODUCT(S) RETURNED FOR REPLACEMENT BECOME THE PROPERTY OF OMNI UNITED. I FURTHER CERTIFY THAT THE CONDITION OF THE PRODUCT(S) FOR WHICH THIS CLAIM IS SUBMITTED IS NOT COVERED BY ANY OTHER MILEAGE, ROAD HAZARD, OR OTHER WARRANTY OR PROTECTION PLAN PURCHASED FROM OR PROVIDED BY THE SELLING RETAILER AT THE TIME OF, OR SUBSEQUENT TO, ORIGINAL PURCHASE.</small>		
OWNER SIGNATURE		DATE

VEHICLE INFORMATION													
YEAR ④	MAKE					MODEL				SPLIT FITMENT YES/NO			
VIN (VEHICLE IDENTIFICATION NUMBER) ⑤													

TYRE INFORMATION			
BRAND AND PATTERN ⑥	SIZE ⑥	TYRE MILEAGE AT THE TIME OF REMOVAL ⑦	MILES/KM
DATE OF PURCHASE (AS GIVEN ON PROOF OF PURCHASE) ⑧	DATE OF REMOVAL ⑨		

REPLACEMENT TYRES PROVIDED		
INVOICE NUMBER ⑩	BRAND AND PATTERN ⑩	SIZE ⑩

WARRANTY RETURN INFORMATION				
⑪ TYPE OF CLAIM	<input type="checkbox"/> WORKMANSHIP & MATERIALS		<input type="checkbox"/> RIDE VIBRATION	
	<input type="checkbox"/> ROAD HAZARD		<input type="checkbox"/> 30-DAY SATISFACTION	
LINE	⑫ DOT NUMBER OF REMOVED TIRE	⑬ TREAD DEPTH AT THE TIME OF REMOVAL (mm/32")	⑭ WHEEL POSITION	⑮ REASON FOR RETURN/REMOVAL
1				
2				
3				
4				
5				
6				

RETAILER CERTIFICATION	
<small>I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THE FOREGOING STATEMENTS ARE CORRECT. I FURTHER CERTIFY THAT THE CONDITION OF THE PRODUCT(S) FOR WHICH THIS CLAIM IS SUBMITTED IS NOT COVERED BY ANY OTHER MILEAGE, ROAD HAZARD, OR OTHER WARRANTY OR PROTECTION PLAN PURCHASED FROM OR PROVIDED BY THE SELLING RETAILER AT THE TIME OF, OR SUBSEQUENT TO, ORIGINAL PURCHASE. I FURTHER UNDERSTAND THAT SHOULD OMNI UNITED LEARN OF ANY OTHER WARRANTY OR PROTECTION PLAN BEING APPLICABLE, IT WILL, AT ITS SOLE DISCRETION, REJECT THIS CLAIM OR CHARGE BACK ANY AND ALL CREDITS RESULTING FROM THE PROCESSING OF THIS CLAIM.</small>	
RETAILER'S SIGNATURE ⑯	DATE

