



11659 US Highway 10, Lake Park, MN 56554
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ACCESSORIES UNLIMITED WARRANTY CLAIM FORM

AU Claim No.: _____ Dealer Claim No.: _____ Date: _____

Manufacturer Model No.: _____ Equipment Serial No.: _____

Equipment Brand And Model Number Attachment Is Used On: _____ GPM: _____ High Flow: Yes No

Distributor Name: _____

Dealer Name: _____ Phone No.: _____

Dealer's Address: _____

Date of Retail Purchase: _____ Warranty: Yes No

Owner: _____ Phone No.: _____

Owner's Address: _____

Repairs Required: _____

Initial Tests & Observations: _____

Repairs Made: _____

Service Parts Used/Required			
Qty	Part Number	Description	Total Cost

Shop Supplies Used: _____

Dealer Labor Rate: _____ Total Hours Claimed: _____ Total Claim Amount Including Parts And Labor: _____

This Warranty Claim is not valid until signed by an authorized Accessories Unlimited LLC representative. Any and all work performed before this claim has been authorized is subject to non-payment by Accessories Unlimited LLC.
 Please refer to the warranty page in your Owner's Manual for items that are not covered under warranty.
 Photos, along with any other relevant documentation, must be included with the submission of this form.
 Any and all parts used, unless they are Accessories Unlimited LLC parts, are not covered under warranty unless pre-authorized by Accessories Unlimited LLC.

Dealer Technician Name/Signature: _____ Date: _____

Accessories Unlimited Authorization Signature: _____ Date: _____

Accessories Unlimited Final Approval Signature: _____ Date: _____