

## **IPE Warranty Claim Form**

ECHO Inc.

400 Oakwood Rd. Lake Zurich, IL 60047 USA

Phone: (847) 540-3577

Echo Reference Number:			
Received Date:	Returned Date:		
Approved Denied	Pending		
Comments:			
Claim Number Assigned:	Echo Internal Use Only*		
Dealer Name:	Issued Date:		
Dealer Representative Name:	Technician:		
Classification: Rental	Sold Unit Unknown		
Application at Time of Failure:			
Unit Model Name:	Inservice Date (ISD):		
Unit Serial Number:	Engine Serial Number:		
Trailer Serial Number:	Fuel Tank Serial Number:		
Date of Failure:	Date of Repair:		
Hour Meter Reading:	Primary Failed Part Number (PFP):		
Complaint:			



## **Industrial Power Products**

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Cause of Failure:		
Correction:		



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<b>Return these parts</b>	to Ecl	no Inc.				
Part # Replaced F	Part De	scription	Quantity	ity Part Dealer Net (US\$)		Extended Amount
					Sub Total	
Freight Cost for Retuned Parts Sub Total						
Labor Descrip	otion	Hours		Labor Cost/Hour		
					Sub Total	
Travel Location *Travel cost more than \$500 call/email			Mileage Cost/Mil			
					COST/ WINC	
for app	proval*					
					Sub Total	
					<b>Grand Total</b>	



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Photos/Additional Information:
Echo Comments:
Note: When Echo requests failed parts to be returned for investigation, the warranty claim reimbursement will be postponed until parts are received.