



REQUEST FOR ALTERNATOR/STARTER WARRANTY

Up to 2 years after the purchase date

1. Please attach a copy of your invoice to this form.
2. Fill in the form below
3. Send the package to the following address:

Wagendass SARL / Warranty Service
Zone Artisanale Bleu Guimet
Allée Guimet
69250 Fleurieu sur Saône

Surname / First name / Company name:

Invoice number:

E-mail address:

OE Number :

Describe the problem encountered:

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Upon receipt of the equipment, it is tested, then if the warranty is proven, a refund of your order will be made. In case of warranty there is NO REPLACEMENT of the product but a refund.

DATE : / / /