

### LIMITED WARRANTY CLAIM FORM

CLICTOMED INICODMATION

## To be flled out by an authorized Venom Power Tires dealer or distributor.

DEALER INFORMATION	OUSTOMER INFORMATION
Dealer Name:	Dealer Name:
Dealer Address:	Dealer Address:
Dealer Phone Number:	Dealer Phone Number:
Dealer Email Address:	Dealer Email Address:
Dealer Contact Person:	Dealer Contact Person:
VEHICLE INFORMATION	CUSTOMER SIGNATURE
Year:	

#### **PRODUCT DETAILS**

Wheel Size (Diameter x Width)

Make: Model:

DEAL ED INICODMATION

CLAIM #	Picture reference (failure part&picture with DOT&brand name)	CUSTOMER NAME	COUNTRY	Product Details					DOT			Bar code#	PRODUCTION SERIAL NO#	REMAINING TREAD	FAILURE REASON	
				Claim q'ty	BRAND	PATTERN	SIZE(include load index & speed rating)	PR	Part Number	BEGINNING	MIDDLE	END	(on bead)	(on innerliner)	DEPTH(mm)	REASON

# **Basic information (Necessary)**

- 1. The claim form.

  2. The full DOT numbers, including the production week and year of each tire.

  3. The tread depth picture of each tire.
- 4. The serial number/ bar code pictures of each tire.

  5. Purchase invoice (For social media warranty claim)

## Basic information ( Necessary for engineers and the factory to make judgments)

- 1. Bubble, Cracks, Separating: The pictures of the defective parts of each tire.
- 3. Wearing problem: The rotation document (Rotate your tires by prescribed rotation patterns at least every 3,000 -5,000 miles and have documentation showing the rotation schedule.)

Except for the sales invoice or receipt, each tire being submitted for warranty claim will need to have its own set of required photos listed below.

1. Full DOT numbers



2. Tread depth



3. Serial number/bar code



4. Road force test data



Please email the completed claim form and photos to marketing@transamericatire.com. On the email subject header put the words WARRANTY CLAIM and your full name next to it.