

## COMPRESSOR'S RETURN AUTHORIZATION REQUEST FORM

### COMPRESSOR'S INSTALLATION

Date		Vehicle's km	
------	--	--------------	--

### COMPRESSOR'S REMOVAL

Date		Vehicle's km	
------	--	--------------	--

### VEHICLE'S DATA

Make		Model	
Registration Year		Fuel	

### SYSTEM

A/C		Refrigeration	
-----	--	---------------	--

Fault detected \_\_\_\_\_

### SYSTEM'S FLUSHING AND RECEIVER DRIER'S REPLACEMENT DECLARATION

The Company \_\_\_\_\_, under its own liability, certifies that, prior to installation of the compressor [make and model] \_\_\_\_\_, Autoclima code \_\_\_\_\_, purchased on \_\_\_\_\_, Delivery Note nr. \_\_\_\_\_, for which warranty is being requested, cooling circuit flushing and receiver drier's replacement have been performed.

#### Attached pertinent documents.

Date: \_\_\_\_\_

Signature \_\_\_\_\_

Company's Stamp \_\_\_\_\_