

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	
License plate Nr.		VIN Nr.	

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 _____