

# Service Asset Warranty Claim

## 1. Claim Information

Claim No.	_____	Date	____ / ____ / ____
Submitted By	_____	Department	_____

## 2. Asset Details

Asset Name	_____
Asset Tag / Serial No.	_____
Model / Type	_____
Purchase Date	____ / ____ / ____
Warranty Expiry	____ / ____ / ____
Supplier / Manufacturer	_____

## 3. Fault / Issue Description

_____
_____
_____
_____

## 4. Actions Taken

_____
_____
_____

## 5. Attachments

- Copy of purchase invoice
- Photographs (if applicable)
- Correspondence records
- Other: \_\_\_\_\_

Requested By: \_\_\_\_\_

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

Approved By: \_\_\_\_\_

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

### Important Notes:

- Ensure all details are accurate to avoid claim delays or rejection.
- Attach required supporting documents for faster processing.
- Claims should be submitted before warranty expiry date.
- Retain a copy of this form and all communications for your records.

- Incomplete forms may not be processed.