



# Honeywell WARRANTY CLAIM

Mail, email or fax to: Natalya Plunkett

<b>2 WARRANTY CODE NO.</b>

**PLEASE TYPE OR PRINT CLEARLY**

**1 TYPE OF CLAIM (CHECK ONLY ONE)**

Warranty Repair     New Defective Service Parts

Policy Adjustment     Questionable/Disputed

Northshore Power Systems  
4425 N. Port Washington Rd., Ste. 105  
Milwaukee, WI 53212-1082

*email:*  
Natalya.Plunkett@NSPSystems.com

*fax:*  
414-332-2376

**4 WARRANTY PERFORMED BY**  CD  SD  DEALER

Firm Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Phone \_\_\_\_\_ Zip Code \_\_\_\_\_

Signed \_\_\_\_\_

**3 OWNER'S LAST NAME** \_\_\_\_\_ **COMMERCIAL USER**

YES     NO

FIRST \_\_\_\_\_ MI \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

PHONE \_\_\_\_\_ ZIP \_\_\_\_\_

Purchased Date			Failure Date			Repair Date		
Mo.	Day	Yr.	Mo.	Day	Yr.	Mo.	Day	Yr.

Customer Signature \_\_\_\_\_

<b>5 Engine/Transmission Short Block/Model No.</b>	<b>Spec No.</b>	<b>D.O.M. or Serial No.</b>
<b>Equipment Manufacturer</b>	<b>Type of Equipment</b>	<b>Engine Received</b>
		<input type="checkbox"/> Mounted <input type="checkbox"/> Detached

**6 HOURS USED** \_\_\_\_\_ **7 UNIT ORIGINALLY SOLD BY** \_\_\_\_\_

**FAILURE SUFFIXES**

AW- Assembled Wrong	FM- Foreign Material	SD- Shipping Damage
BC- Broken/Cracked	IF- Improper Flt	SG- Scored/Galled
BL- Blown	LK- Leaked	SS- Stuck/Seized
BT- Bent/Twisted	MI- Missing	ST- Stripped
CD- Porous/Casting Deficiency	ML- Magnet Loose	UO- Unknown/Other
CL- Came Loose/Off	NS- Not Seating	VC- Valve/Clearance
CP- Corroded/Pitted	NY- Noisy	WN- Worn
EF- Electric Failure	OA- Out of Adjustment	WP- Warped
	PM- Part Made/ Machined Incorrectly	

**8 PARTS HAVE BEEN**

Returned to Factory     Returned to Central     Retained & Tagged

**9 DEFECTIVE PART NUMBER** \_\_\_\_\_ **10 FAILURE SUFFIX** \_\_\_\_\_

**11 Condition Found/Probable Cause of Failure (Word "Defective" Not Sufficient)**

\_\_\_\_\_

\_\_\_\_\_

**12 Job Number/Work Performed. If Necessary to Remove & Replace (R&R) Engine from Equipment, then Show R&R Separately.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

13 Miscellaneous	Dollars	Cents	
Freight/Postage Allowance Attach Freight Bill			
14 Labor	HRS.	MINS./TENTHS	JOB#
Repair 1			
Repair 2			
Repair 3			
Misc. Labor			
R & R			
TOTAL			

16 Part Number	Qty.	Description

**15 FACTORY USE ONLY**

OEM Code \_\_\_\_\_

Defect Code # \_\_\_\_\_

End Use Code # \_\_\_\_\_

Division \_\_\_\_\_

**17 Engine/Short Block/Transmission (Authorized Signature Req'd)**

Authorized By: \_\_\_\_\_

Firm Name: \_\_\_\_\_