



Fresco 9000 MaXX - Warranty Claim Report

CLAIM NO. OR WORK ORDER NO.: # _____

REQUIRED INFORMATION

Model: PN 121211447 (Benling Compressor) PN 121211447.1 (Benling Compressor/ Manuli Lines)
 PN 121211447.1 PO (Manuli Lines/ Posung Comp.) Serial #:

Date Purchased: M: _____ D: _____ Y: _____ Date of Service: M: _____ D: _____ Y: _____

Truck Make: _____ Model: _____ Vin. No: _____

DEALER INFORMATION

Dealer Name: _____

Date Claim Submitted: M: _____ D: _____ Y: _____ Submitted By: _____

Problem Description: (Please Print Clearly) - Additional information sheets attached - Yes or No

Labor Performed: (Please Print Clearly) - Additional information sheets attached - Yes or No

<u>SRT Code</u>	<u>Description</u>	<u>Minutes</u>
[A] Total Minutes		
[B] Total Labor Claim (Multiply [A] by \$1.60)		\$

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Continued

REPAIR PARTS SUPPLIED - NOTE: Warranted parts to be returned to JJK for testing.				
<u>Qty</u>	<u>Part No.</u>	<u>Description</u>	<u>Unit Dealer Cost</u>	<u>Total Dealer Cost</u>
Repair Parts Sub-Total				
Dealer Supplied Parts - ADD 20%				
[C] Total Repair Parts Claim				\$
[D] Total Warranty Claim ([B] Total Labor Claim + [C] Total Repair Parts Claim)				\$

For JJK Office use ONLY:

- Date of claim receipt: _____
- Claim complete? : _____
- Claim Approved * : _____
- Claim amount : _____
- Payment Date : _____
- Check No. : _____
- Authorized by : _____

* Note: Reason for claim not being approved:
