

Warranty Claim Form

Customer Details			
Customer Name			
Address			Postcode
Tel No.			
Fax No.			
Email			
Claim Details			
Make / Manufacturer			
Model			
Engine / Serial Number			
Part Number			
Description			
Mileage/Hours When Fitted			
Mileage/Hours When Failed			
Date Fitted			
Date Failed			
Purchase Invoice Number			
Description of Failure			
<p>WARRANTY CLAIM PROCEDURE WILL NOT BE ACTIONED UNLESS THIS FORM IS RETURNED WITH THE FAILED PART(S) WITHIN 14 WORKING DAYS.</p> <p>DATA PROTECTION By submitting this form, you give Sabre Plant and Marine Ltd permission to store, process and/or share your personal information with the manufacturer(s) listed above and courier services for shipping purposes. We will not share or use your details for marketing purposes or share them for any other purpose, other than required by law. You can withdraw or change your consent anytime by writing to us. All processing of your personal data and any outstanding claims will cease once you have withdrawn consent, but this will not affect any personal data or claims that has already been processed prior to this point. I understand these details will be held securely and in confidence by Sabre Plant & Marine Ltd, for the purposes of on-going administration in compliance with the General Data Protection Regulation (GDPR).</p>			

Signed.....

Date.....