

PENTALIFT WARRANTY CLAIM POLICY AND PROCEDURES

How to submit a Warranty Claim

Pentalift Equipment Corporation expressly warrants that any product manufactured by Pentalift Equipment Corporation will be free from defects in material and workmanship under normal use for a period of one (1) year from the date of shipment of the equipment, provided the original purchaser maintains and operates the product in accordance with proper procedures.

The warranty stated in the previous paragraph is that expressed by PENTALIFT EQUIPMENT CORPORATION AND IS IN LIEU OF ALL GUARANTEES AND WARRANTIES, EXPRESSED OR IMPLIED BY ANYONE OTHER THAN PENTALIFT EQUIPMENT CORPORATION. This warranty does not cover any failure caused by improper installation, misapplication, overloading, abuse, negligence or failure to lubricate and adjust or maintain the equipment properly and regularly. Parts requiring replacement due to damage resulting from vehicle impact, abuse, improper operations, improper or insufficient lubrication, or lack of proper protection are not covered by this warranty.

NOTE: Under no circumstances, will deductions from invoices be accepted to cover warranty claims. Warranty claims will not be processed until full payment of original equipment is received.

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- 1-1 Warranty **does not cover** adjustments or lubrication at time of installation. Warranty **does not cover** regular maintenance or adjustments and lubrication or improper installation. Carefully follow all instructions and procedures outlined in the Owner's Manual and/or installation instructions (shipped with equipment). Must return Warranty registration form in owners manual to Pentalift post sales customer service department.
 - 1-2 Charges **will not** be accepted for pre or post delivery preparation; normal adjustments and lubrication; repairs due to neglect, abuse, damage in transit or faulty installation and for consequential damage; such as loss of use or rental charges.
 - 1-3 A Pentalift Warranty Claim Form (copy attached) and Warranty Claim Number **must be issued** with the predetermined value of claim, **prior** to commencing repairs to be covered by warranty.

- 1-4 **Prior** to processing the final payment/credit for the customer, **signed approval of the Warranty Claim Form** must first be obtained from a) the Plant Mgr. for metal products or b) Dock Seal Mgr. for seals/shelters. The President must then sign all Warranty approvals.
- 1-5 **No warranty charges** will be accepted unless accompanied by a Pentalift Warranty Claim Form (#00319-1) and Warranty Authorization Number.
- 1-6 All warranty claims **must be** submitted on a Pentalift Warranty Claim Form) complete with Warranty claim Number. This form must be filled out completely, be accompanied with any supporting documentation and be returned within 10 days of date issued.
- 1-7 Warranty labour is to be invoiced at distributor cost. Labour time to repair and/or replace equipment is to be obtained, **prior** to commencing work, from Pentalift Post Sales Customer Service Department.
- 1-8 Warranty travel charge will be on a per hour basis, (2hr. Max.). Travel time approval is to be obtained, **prior to commencing work**, from Pentalift Post Sales Customer Service Department.
- 1-9 When ordering warranty parts, they must be identified as warranty replacement parts. The request must be accompanied with the equipment serial number. At the time of order, Pentalift will assign a **Returned Goods Authorisation Number (RGA#)**, which will be shown on the parts order.
- 1-10 All warranty parts will be shipped on an invoice and credit basis, F.O.B. factory, **freight collect**. Parts being returned must be **shipped prepaid**. When applicable freight charges are approved they must be verified by a copy of the carriers invoice before being added to the warranty claim.
- 1-11 All parts replaced under warranty must be returned to Pentalift for evaluation within **fifteen (15) working days of the R.G.A. issue date**. All warranty parts must be tagged and identified with the following information: a) Customer name and address, b) Date removed from service, c) Equipment serial number, d) A complete description of the product failure. Warranty claims will not be processed until such parts are received. If inspection finds **no defect** under warranty, the part will be returned, **freight collect**, to the distributor with an inspection report. **No Credit** will be issued for any part, labour, travel and freight charges incurred in replacement of such parts.
- 1-12 **Returned parts shipments will not be accepted without a RGA# clearly marked on the outside of the package. Shipments without a RGA# will be refused and returned to sender, at sender's expense and no credit will be issued.**
- 1-13 **No credit** will be issued for parts not supplied by Pentalift unless **written approval** by Pentalift's Post Sales Customer Service Department is obtained prior to commencement of repairs.
- 1-14 Warranty repairs **must be made** by trained service personnel, employed by an **authorized Pentalift dealer**. Repairs made by unauthorized personnel will void all warranties.
- 1-15 Upon completion of the warranty repair, the Post Sales Customer Service Department will forward a completed **Credit Note Authorization Form** (copy attached) **and all supporting documentation** to the President for signing.

Material Required (All Defective parts must be returned prior to any credits issued):

RGA Number Required: _____

Dealer Estimate Cost:

Labor: _____ Hrs @ \$ _____ per Hr

Travel: _____ Miles @ \$ _____ per mile

Warranty Approved Claim Number if Approved # _____ Not Approved

Post Sales Customer Service: _____ Date Signed: _____
Month / Day / Year

Dealer must submit Service Work Order with Warranty Invoice.

Pentalift Use Only

Parts Installed _____ \$ _____	
Parts Order No. _____	Invoice No. _____ R.G.A. No. _____
Parts Returned: Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required <input type="checkbox"/>	
Labour - _____	Travel time: _____ + Regular time: _____ = Total hours: _____
Total hours: _____	x \$ _____ = \$ _____
Total Claim: \$ _____	
Forward to Materials Manager <input type="checkbox"/> Yes <input type="checkbox"/> No	
_____ Pentalift Customer Service Department	_____ Date
_____ Pentalift Production	_____ Date
Phone (519) 763-3625	
_____ Fax (519) 763-2894	_____ Date
_____ President	

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