

Warranty Claim Form

Complete all highlighted areas on the Warranty claim form below, including the Return Merchandise Application number (RMA#).

RMA# can be obtain from ATRO Customer Service at 1-800-325-6114. Product must have been purchased directly from ATRO. For product purchased from

a distributor or other source, please contact them directly.

Customer Name:	Date:
Account Number:	
Location:	RMA#:
Contact Name:	
Phone Number:	
E-mail Address:	

Part Number	Quantity	Problem Description

Additional Information:

-						
Date Purchased from	ATRO:		PO# or ATRO Invo	oice#:		
Date Installed:		Date Replaced:		Time in Se	rvice:	
Sold to:			Truck Model:			
Truck Make:			VIN:			
Truck Year:			Truck Number:			

Type of truck (mixer, dump, log):

What other suspension components installed are ATRO's?

How long have the other components been installed?

Were the other components inspected in good working order ?	YES	NO	Don't Know

What, if any, other suspension components were replaced during the original job?

What, if any, suspension related components did you replace during the replacement job?

Copies of the original and replacement installation paperwork are required before the warranty will be processed.

Submit may not work with other pdf viewers except Adobe Reader. If that is the case, SAVE AS to your computer and attach to an email.



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