



Warranty Claim Form

1315 Storm Parkway, Torrance, CA 90501 • Tel: 800.421.5830 • 310.539.5221 • Fax: 310.539.5158 • Email: customer_service@mkdiamond.com

Authorized Service Center

Account#: _____ Service Center Claim#: _____ Date: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____

Email: _____

Owner Information

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____

Email: _____

Unit Information

Purchased From: _____ Date Purchased: _____

Model#: _____ Serial #: _____

Engine Mfg: _____ Pump Mfg: _____

Description of Problem

Part Used	Qty	Description	Cost	Description of Repair	Invoice

Total Time (hr): _____ Parts Total: \$ _____

Labor Amount: \$ _____ Claim Total: \$ _____

OFFICE ONLY

Approved By: _____ Date: _____ Approved Amount: \$ _____