

WARRANTY CLAIM FORM

please complete all fields

DATE OF ISSUE MAY 2025

CLAIMANT DETAILS

Claimant name		Original order number	
Claimant reference		Date of claim	
Address		Contact name	
		Contact e-mail	
		Contact tel. number	

EQUIPMENT DETAILS

Engine / genset serial number		Date put into service	
Type of equipment in which used			
Manufacturer of equipment			

FAULT DESCRIPTION AND ENGINEERS' REPORTS

Date of failure		Hours run before failure	
Problem as originally reported			
Detailed description of failure (please attach photos as appropriate)			
Action already taken to rectify fault			

ACTION REQUIRED FROM SLEEMAN & HAWKEN LIMITED

Supply replacement parts (please enter details on attached sheet and specify method of dispatch)
Reimburse costs (enter details on attached sheet giving breakdown of labor costs, travelling costs & mileage)
Other (please attach a separate sheet with full details)

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FULL DETAILS OF COSTS CLAIMED

Labour costs (see notes below)						
Labour cost per hour		Number of hours		cost		
Travelling time (see notes below)						
Travel cost per hour		Number of hours		cost		
Mileage costs (see notes below)						
Cost per mile/km		Number of miles/km		cost		
Other costs (please specify and attach copies of invoices as appropriate)						
				cost		
				cost		
				cost		
				Total cost		

IMPORTANT:

- The rates of reimbursement of labor, travelling and mileage costs are subject to prior agreement with Sleeman & Hawken.
- Travelling distances are limited to 50 miles (80km) radius. Any distance beyond this will require prior authorisation from Sleeman & Hawken.

