

Warranty Claim Form



Complete **only** the areas associated with this concern

Fluids	ATF
Level	<input type="checkbox"/> OK <input type="checkbox"/> Low <input type="checkbox"/> High
Condition	<input type="checkbox"/> OK <input type="checkbox"/> Detail on page 2
Leaks	<input type="checkbox"/> None <input type="checkbox"/> Detail on page 2
ATF Temp when problem occurs _____ °C	

Noise

Type of noise (whine, rattle, bang, etc.):

Does noise increase decrease with
 engine speed vehicle speed?

Does the noise occur in Neutral? Yes No

Customer states noise getting worse? Yes No

Shift Quality Detail

Circle or check appropriate number or area and describe where necessary.

Does concern occur:
When moving selector lever from
 N-D P-D N-R R-P P-R

On sudden load change
 acceleration deceleration

Erratic (please explain) _____

Fluid Condition Detail

ATF

Color: _____

Odor: _____

Contamination Type: _____

Differential Fluid

Color: _____

Contamination Type: _____

Leakage Detail

Use picture / drawing / sketch if possible to show location (attach drawing).

Vent Transmission Front Axle drive
 Center Differential

Output flange left right rear

Drain plug transmission front axle drive
 center differential

Weep hole
 front center rear

Oil cooler pipe
 transmission radiator other

Oil cooler, banjo bolt seals
 Oil pan
 Converter housing

Various cover plates: _____

Joining housings: _____

Others / Remarks: _____

Additional Information:

