Meritor Heavy Vehicle Systems Australia Limited A.C.N. 004 479 430 70 Berkshire Road, Sunshine, (P.O. Box 25) Victoria, 3020, Australia Telephone: (03) 9311 6555 Facsimile: (03) 9312 1810

Please submit to: auswarranty@meritor.com

WARRANTY CLAIM FORM					CLAIM NO.		
For use when part h	nas been fi	tted to vehicle			*DATE		
*BUYING DEALER			MERITOR INVOICE NO.	TOWI	N / CITY		
VEHICLE MAKE & MODEL			*OWNER	TOWN	TOWN / CITY		
VEHICLE'S TYPE OF SERVICE					SIS NO.		
*MERITOR PRODUC	CT/PART N	0.		*SER	IIAL NO.		
AXLE SPEC			RATIO		AXLE SERIAL NO.		
*DATE INTO SERVICE			*FAILURE DATE	*KMs			
Items marked * are	mandatory	. Claims rece	ived without the required ir	nformation and supporting	information will	not be processed	
*COMPLAINT:							
Click here to ento	er text.						
CAUSE:							
Click here to enter text.							
*CORRECTION: (Please attach evidence, ex: Pictures and sublet repair invoice etc.) Click here to enter text.							
	T						
MERITOR P/N	QTY		DESCRIPTION	N	TOTAL	MERITOR USE ONLY	
Parts Total							
This section to be completed for OEM claim or if agreed with Cummins-Meritor							
LABOUR hours @ \$ per hour							
OTHER							
CLAIM TOTAL							
TOTAL AMOUNT PAID							
Parts returned to M	eritor: Y\\	√? Dat					
RETURN ADVICE N	О.		DATE:	SIGNED	GNED:		
MERITOR CLAIM	NUMBER:						
Document: FM070 Issue: H					Date: 20 J u	ın 2023	