

All Fleet Solutions, LLC 500 Bethany Dr, Ste 100 Allen, Texas 75013

Phone: 844-423-7200 Fax: 844-423-7200

Sold To:				Ship To:		
Compar	ny:			Company:		
Contact Name:				Alt. Contact Name:		
Email:				Alt Email:		
Phone:				Alt. Phone:		
To ensure quick and precise assistance please provide as much detail as possible. We would greatly appreciate a technical contact who could further describe the malfunction and other variables involved time of the malfunction.  Quantity   Item   Part Description						
Quant	ity item	•	Part Descrip	otion		
Date / Sales ID Se			Serial	l #	Each harness has a white vinyl tag with a Part	
					Number, Production Date or Sales ID (S/ID), and Serial Number (S/N).	
Year	Make	Model		VIN		
Please describe in detail the type of failure in the space below.						

## Note: this type of detail helps troubleshoot and resolve your potential claim

When the failure occurs: all the time, Ignition On, only when equipment is active, or during a timer mode? What steps were taken in the diagnostic process?

If a timer is involved, what is the diagnostic LED's status? What other products are connected to the timer? Were you able to replace the product with a like product and eliminate the failure?

## To Start Your Claim: Email the completed form to sales@allfleetsolutions.com

All Fleet Solutions will review your claim and issue an RMA number. Our team will call with any questions.

Once an RMA Number has been issued, please include this RMA form and the RMA number in the return shipment.

The warranty team will review the product, if the failure is covered by warranty the product will be repaired or replaced. AFS will not issue credit for any parts not returned to AFS. If a return shipping label is required, it must be requested with weight and dimensions of shipping package. Shipping for items not within warranty will be billed at actual cost.