



### COMPRESSOR WARRANTY RETURN FORM

Diagnosis of the appearance of the compressor can be an effective method of determining the conditions under which it was operating.

With the results of the diagnosis it is possible to identify the cause of the problem.

Please fill out this form as complete as possible. Compressor complaints without this (filled out) form can not be taken into consideration.

<b>Date</b>	- -	(dd-mm-yyyy)	<b>Customer report no.</b>	
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#### 1 Company information

Name		Customer number	
Address			
Country			
Contact person			
Tel. No.		E-Mail	

#### 2 Vehicle & Compressor data

Vehicle information		Compressor information	
Brand		NRF part number	
Model		Customer part number	
Model year		Production code	
Engine		Installation date	
VIN		Removal date	
Rear evaporator	Yes:      No:	Installation mileage (km)	
Refrigerant charge	gr.	Removal mileage (km)	

#### 3 Problem description

Brief description of the problem	
Under what conditions did the problem occur ?	
How did you recognize the problem?	
Weather conditions?	
Ambient temperature?	
Who fitted the compressor?	
Other information or comments:	

**NRF WARRANTY DEPARTMENT**

RMA number: