

## BROWN & WHITE GOODS EXTENDED WARRANTY CLAIM FORM

Please FAX the completed form to Claims Dept. Direct Fax 04-3724015. Claims Direct Tel. 04-3724014  
Please complete all sections & Supply documents as required, to prevent delay

### Service Centre Details

Service Centre Company Name			
Date		Service Centre Co. Fax No.	
Tel. No.		Job Title	
Job Title		Service Centre Contact Person	

### Policy And Unit Details

Customer name			
Proposal Form No.		Purchase Date	
Contact Tel No.		Unit Make	
Model		Date of failure	

### Repairer Defect Report

Register No:..... Serial No:.....

Customer approval must be obtained to diagnose as required

Is Unit in Service Centre ☐ Yes ☐ No ☐ Dismantled ☐ Yes ☐ No ☐


Job card copy must be faxed with this claim request form

Parts Required Cost		Discount	
Retailer / Customer Share		Nett Cost	


Labour Hours Cost		Discount	
Retailer / Customer Share		Nett Cost	


Total amount requested

### Warranty Administration Department Use Only

Claim Accepted		Policy Maximum Claim liability	
Authority Code		Total Amount Authorised	

Note: Authority Code Is Valid For 30 Days From Authorised Date

Claim Pending Yes ☐ No ☐ Reason

Claim Rejected Yes ☐ No ☐ Reason

Fax returned Date

Time Processed by

Note: In order to process the payment, the claims department must receive the invoice for the authorised repair WITHIN 30 DAYS from the AUTHORISED DATE. The invoice must include the following: Job Card Copy, Labour Terms, Agreed Labour & Costs, Authority Code as stated in this fax claim form.