



Warranty Claim Form DRIVES

PALADIN UTILITY

For Internal Use Only:	CR	Y	N	AMT _____
Warranty # _____	Invoice # _____	Order # _____		

Claim Date: _____ Pengo Account #: _____

Company Name: _____ Phone: _____

Fax: _____ Email: _____

PO or Order #: _____

Please attach copy of invoice.

Part No.: _____ Model: _____ Serial No.: _____

Cause of Claim:

_____ Customer Cause (Wants Product Repaired at Customer Expense)

_____ Product Inspection (RMA) _____ Product Defect / Failure (Warranty)

Drive Use:

Type of Prime Mover: Mini Skid Skid Steer Backhoe Mini Ex Excavator Utility Truck

Type of Use: Anchoring Drilling Both Hrs In Service _____

Type of Problem:

_____ Hydraulic Motor: Not Functioning Leaking Not Shifting Irregular Noise Other

_____ Gearbox: Irregular Noise Output Shaft Not Turning Leaking Oil Not Shifting
_____ Output Shaft Hole Location Other

_____ Bail (housing): Wrong Type Damaged Not Fitting

Additional Comments:

Customer (End User) Name _____ #Phone _____

Fax To: 712-845-2497

Pengo, 500 E. Highway 10, Laurens, IA 50554 800-599-0211
pengosales@paladinbrands.com - www.pengoattachments.com