

WARRANTY CLAIM FORM



Hurco's goal is to provide customers with the best possible service. Please fill out this claim form completely. If the form is not complete, warranty consideration may be delayed or denied. Return form to:

Attn: Jeremy Adams
Email: jeremy@gethurco.com
Fax: 605-743-2465

Dealer Information

Company: _____

Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Contact Name: _____

Daytime Number: _____

Fax Number: _____

Email: _____

Customer Information

Company: _____

Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Contact Name: _____

Daytime Number: _____

Fax Number: _____

Email: _____

Ship warranty parts to:

Dealer:

Customer:

Purchase Date: _____

Serial Number: _____

VIN Number: _____

Engine Serial Number: _____

Model Number: _____

Failure Date: _____

Failed Part/s:

Quantity	Part Number	Description

Explain in detail the failure. Please refer to the appropriate owner’s manual for the correct part description and part number.

PARTS WARRANTY:

-If requested, send the defective part back for our inspection and evaluation within 30 days. If Hurco determines the product is NOT defective, we’ll call you with the options available to you at that time.-Customer is responsible for shipping charges to factory.

-All defective parts must be returned to Hurco with a copy of this completed form. Part assemblies must be complete or credit may be denied. Package all parts in a sturdy box and tape securely. Hurco is NOT responsible for lost shipments. Please write the claim number on the outside of the box.

LABOR WARRANTY:

-Authorization for labor must be obtained from Hurco within the warranty period and PRIOR to service being performed.

-Labor must be PREAPPROVED and is based on regular hourly rate of \$65.00, NO OVERTIME.

Please allow 3 weeks for processing and delivery of your warranty claim. Incomplete forms or step process may result in delayed processing.

WARRANTY CLAIM FORM



TO BE COMPLETED BY HURCO WARRANTY DEPARTMENT

WARRANTY CLAIM NUMBER: _____

DATE: _____

Scrap defective parts

Return defective parts to Hurco. Parts must be received to avoid being charged for replacement parts.

Return parts to:

Hurco Technologies, Inc.
Attn: Service Department.
409 Enterprise St.
Harrisburg, SD 57032

Please include a copy of this form, or reference the Warranty Claim Number on the box.
Contact Jeremy with any questions at 800-888-1436 or email jeremy@gethurco.com.

Your warranty replacements ship date: _____

Warranty labor authorized on: _____ For Amount: _____

Performed by: _____