



LIPPERT
COMPONENTS®

LIPPERT INTERIORS WARRANTY CLAIM

*Dealer Name	Contact
*Address	*Phone
	*Fax
*City	Cell
*State	*Email
Zip	
*Pictures	*Law Tag

Retail Customer Information

Retail Name	Contact
Address	Phone
	Fax
City	Cell
State	Email
Zip	

Coach Information

*Complete VIN	*Model
*OEM	*DOM
*Make	*DOP
*Sofa Requests: Are Cushions Sewn In?	* Are Seat Covers Zippered?

*Measurement From Outside Edge of Armrest to Outside Edge of Armrest

** Required Information*

Claim Description

LIPPERT
COMPONENTS®**For Office Use Only**

Plant

Customer

PO

Due Date

Ship Via

N/C Warranty

Jackie's Notes

Lippert Interiors Warranty Claim Form **MUST** be filled out COMPLETELY and remitted with complete REPAIR ORDER attached! Leaving ANY information blank delays the claim process and will result in NONCOMPENSATION for any and all parts, labor and freight.

Claim **MUST** be remitted by mail, fax or e-mail to: interiorwarranty@lci1.com to be processed. Claims remitted with returned parts will not be accepted.

A W-9 form **MUST** be on file with SEAT TECH for the Warranty Dept. to process a claim.

To print a copy of the W-9 go to: www.irs.gov/pub/irs-pdf/fw9.pdf?portlet=3

Phone: (574)312-7361 - E-mail: interiorwarranty@lci1.com - Fax: (574)538-4343



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Follow proper safety practices. If in doubt, consult a professional RV technician.