				Warran	ty Claim	Form for PCR	/LT						
Maxxis International				MAXXIS Technology Center 480 Old Peachtree Road Suwanee, GA 30024-2977 PH. 1-866-509-7067				Cheng Shin Rubber, USA					
						70-822-4361				GIENIS	SHIN 7		
Distrib	Distributor's Name:					Distributor's Point of Contact:				<u>Claim Num</u>			
Distrib	Distributor's Address:				Phone Number:								
				Fax Number:					•				
	To Be Com			npleted By Distributor	Tread					Official Use			
Tire No.	Dealer's Name (Mileage)	Part Number		Size and Description		D.O.T. Serial No.	Made in T/C	Depth Remaining	Reason for Claim		Tread Depth New (32nds)	Tread Depth Used (%)	Credit (Y/N)
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													
15													
Notes:													
Total N	lumber of Tires:												
	lumber Compens	sated:											
	lumber Not Com												
	umber:					Date Claim Cor	nnlete	q.					
				Warranty C	laim Sur	nmary Form fo							
	Maxxis	Internation	al			chnology Center		1	Ch	eng Shi	n Rubbe	r, USA	
CMAXXXIS)					480 Old Peachtree Road Suwanee, GA 30024-2977 PH. 1-866-509-7067 Fax. 770-822-4361				CHENE SHIN TIRE-				
Distributor's Name:			Make:					Claim Number					
Distributor's Address:			Model of Vehicle:										
DISTIND	ulor s Address.												
Custo	mor					Year: Date of Purchase	· ·						
Cusio	inei.												
						Date of Tire Rem		iro:					
			To Do Or	plotod Dy Distribution		Estimated Mileag	e on I						
			To Be Con	npleted By Distributor				Tread				ficial Use	
Tire No.	Dealer's Name	Part Number		Size and Description		D.O.T. Serial No. (11 digits)	Made in T/C		Reason for Claim		Tread Depth New (32nds)	Tread Depth Used (%)	Credit (Y/N)

No.	Dealer's Name	Part Number	Size and Description	(11 digits)	in T/C	(32nds)	for Claim	Result	(32nds)	Used (%)	(Y/N)	
1												
2												
3												
4												
5												
6												
7												
8												
9												
10											Ĺ	
Notes:												
Total N	lumber of Tires:											
Total N	lumber Compens	sated:										
Total N	lumber Not Com	pensated:										
RA Number:				Date Claim Completed:								