

WARRANTY REGISTRATION FORM

<i>v</i> uico	EMAIL: tcv.na-warranty.mailbox@valeo.com o				REGRIGERANT			
22150 Challenger, Elkhart,					FRONT	REAR	D/	ASH
PH: (574) 264-2190 Toll Free: (800) 462-6322								
EVAPORATOR 1 MODEL AND SERIAL #: COMPRESSOR 1 VALEO PA				RT#:	ALTERNATOR MODEL AND SERIAL #:			
EVAPORATOR 2 MODEL AND SERIAL #: COMPRESSOR 2 VALEO PA			RT#:	COMPRESSOR MOUNT KIT #				
EVAPORATOR 3 MODEL AND SERIAL #: CONDENSER 1 MODEL ANI) SERIAL #:	BELT #(S)				
EVAPORATOR 4 MODEL AND SERIAL #	CONDENSER 2 MODEL AND SERIAL #:			MISC.				
INSTALLER					P	URCHASER		
NAME				NAME				
ADDRESS				ADDRESS				
CITY	S	TATE	ZIPCODE	CITY		STA	ΤΕ	ZIPCODE
PHONE NUMBER				PHONE NUMBER				
SIGNATURE OF INSTALLER				DATE OF PURCHASE				
			BODY INF	ORMATION				
T				OEM BODY#	LAST 8 OF V.I.N.#			
DEALER MILAGE			MILAGE	COMMENTS				
			1					