



U.S. DISTRIBUTORS OF CAOFEN ELECTRIC MOTORCYCLES

WARRANTY CLAIM FORM

2-Year / 24,000 Mile Limited Parts Warranty (Excludes Labor)

Today's Date: _____

Please fill out this Warranty Claim Form and return it to: Sales@SECycles.com with a copy of your Purchase Invoice

NAME OF PERSON FILLING IN THE FORM: _____ PHONE NUMBER: _____

CUSTOMER/COMPANY NAME: _____

ADDRESS: _____

YEAR: _____ MODEL: _____ COLOR: _____ CURRENT MILEAGE: _____

VIN # _____ COMMENTS: _____

DESCRIPTION OF PROBLEM(S): _____

REQ. REPAIRS:

PART QTY: _____ PART #: _____ DESCRIPTION: _____

PART QTY: _____ PART #: _____ DESCRIPTION: _____

PART QTY: _____ PART #: _____ DESCRIPTION: _____

PART QTY: _____ PART #: _____ DESCRIPTION: _____

PART QTY: _____ PART #: _____ DESCRIPTION: _____

COMMENTS/SUGGESTIONS: _____

TECHNICIAN'S SIGNATURE: _____ Date: _____

SIERRA ELECTRIC MOTORCYCLES USA SALES HEADQUARTERS

Sales@SECycles.com (714) 714-0240, 1281 Logan Ave., Costa Mesa, CA 92626 www.SECycles.com