

Hawker Pacific Pty Ltd Warranty Claim Information

NOTE: Completed Claim form and part must be received within 15 days from date of failure

*All sections need to be completed

CUSTOMER INFORMATION: Must be completed		Date:	
Name:		Account Number:	
Delivery Address:		Phone:	Fax:
Contact Name:		Email:	
REPAIR FACILITY: Must be completed			
Name:			
Delivery Address:		Phone:	Fax:
Contact Name:		Email:	
Part Information:	Failed Part Information	Replacement Part Purchased Information	
*Part Number			
*Description			
*Serial Number			
*GRN Number			
*Quantity			
*H.P Invoice Number			
*Part Hours			
*Installation Date			
*Failure Date			
*Defect Information: Provide full details, attach reports if necessary			
Aircraft Information:		Engine Information:	
*Model:		*Model:	
*Rego:		*S/No:	
*S/No:		*Left / Right Hand	
*Hours:		*Total Hours:	
		*Installation Date:	