







COMPRESSOR'S RETURN AUTHORIZATION REQUEST FORM

| COMPRESSOR'S INSTALLATION | ON | |
|-------------------------------|--|----------------------------|
| Date | Vehicle's km | |
| COMPRESSOR'S REMOVAL | | |
| Date | Vehicle's km | |
| VEHICLE'S DATA | | |
| Make | Model | |
| Registration Year | Fuel | |
| | | |
| SYSTEM | | |
| A/C | Refrigeration | |
| The Company | tion of the compressor [make and model] , Autoclima code | , under its own liability, |
| purchased on | , Delivery Note nr | , for which warranty is |
| | lushing and receiver drier's replacement have b | |
| Attached pertinent documents. | | |
| Date: | Signature | |
| Company's Stamp | | |