



WARRANTY CLAIM APPLICATION

1. RGM/RMA #:

DISTRIBUTOR INFORMATION

(Skip this section if claim is originating from a Dealer or Consumer)

2. Distributor Name: _____ 3. Account #: _____
4. Street Address: _____ 5. City: _____ 6. State: _____ 7. Zip: _____
8. Phone: _____ 9. Fax: _____ 10. E-Mail: _____

DEALER INFORMATION

(Skip this section if claim is originating from a Consumer)

11. Dealer Name: _____ 12. Dealer #: _____
13. Street Address: _____ 14. City: _____ 15. State: _____ 16. Zip: _____
17. Phone: _____ 18. Fax: _____ 19. E-Mail: _____
20. Work Order #: _____ 21. Date of Service: ____ / ____ / ____ 22. Technician: _____

CONSUMER INFORMATION

23. Consumer Name: _____ 24. (Skip this item if Consumer is not a Mobile Customer)
RV Brand/Model/Year: _____
25. Street Address: _____ 26. City: _____ 27. State: _____ 28. Zip: _____
29. Phone: _____ 30. Fax: _____ 31. E-Mail: _____
32. Winegard Product Model: _____ 33. Serial #: _____ 34. Date of Purchase: ____ / ____ / ____

PROBLEM INFORMATION

35. Description of Problem: _____

36. Diagnosis: _____

37. Corrective Action: _____

38. Materials

Qty	Part #	Description	Cost	Parts Returned	
				Y	N
Total Material Charges					

39. Labor	_____ hrs	@ \$ _____	per hour	Total Labor Charges	\$ _____
40. Shipping Charges	Shipping Method	☐ UPS	☐ FEDEX	☐ OTHER	\$ _____
41. Miscellaneous Charges					
	Tax	Explanation			\$ _____
	Other Charges	Explanation			\$ _____
42. Total Charges					\$ _____

FOR WINEGARD USE ONLY	
Call #	
RMA #	
Shipment #	
Claim #	
Authorized by	
Date	
Ref. RMA #	

Fax to: (319) 754-0715 **E-mail to:** Warranty@winegard.com

Mail to: Technical Services, Winegard Company, 2736 Mt. Pleasant Street, Burlington, IA 52601

In order to process your claim the Consumer proof of purchase documentation is required to be sent to Winegard Company along with the product and this completed warranty claim application.

Winegard Warranty Claim Application Instructions

Upon completion of the repair of a Winegard product that is deemed a Winegard manufacturing error and is within the stated warranty period, complete the warranty claim application form. The completed form and the proof of purchase are to be both faxed or mailed to Winegard and attached to the defective product and returned to Winegard Company at the address listed on the bottom of the form. The warranty claim application must be completely filled out using the following instructions.

1. Claim# (RGM/RMA)... This is the RGM (Return Goods Memo) / RMA (Returned Material Authorization) number that was given at the time Winegard sent service parts. This number is on the packing list of the replacement parts.

Distributor Information (This is the name of the distributor filing the warranty claim.)

2. Distributor Name ... The name of the distributor filing the warranty claim

3. Distributor Account # ... The distributor's Winegard account number if known.

4. – 7. Address/City/St/Zip ... Use the ship to address.

8. – 10. Phone/Fax/Email ... Use the service department numbers. Include an email address if at all possible.

Dealer Information (This is the name of the dealership or service center providing the warranty work.)

11. Dealer Name ... The name of the dealership providing the service work

12. Dealer # ... Use the Winegard dealer number that was issued to this dealer or leave blank if a dealer number has not been issued yet. Winegard will be issuing dealer numbers in the near future.

13. – 16. Address/City/St/Zip ... Use the ship to address.

17. – 19. Phone/Fax/Email ... Use the service department numbers. Include an email address if at all possible.

20. Work Order # ... This is the number we will reference to in any communication or claims processing. If an invoice is also used include it with the WO#.

21. Date of Service ... This is the date the service work is completed.

22. Technician ... The name of the person that is familiar with this service in case questions as to what was performed arise.

Consumer Information (This is the person that owns the Winegard product being serviced).

23. Consumer Name... Name of the consumer.

24. RV Brand/ Model/Yr..... This is the RV manufacturer, their model name and the year of manufacture of the consumers RV if applicable. Does not apply if the warranty is for a Home satellite system or Home off-air antenna system. Example... Damon Intruder 2006.

25. – 28. Address/City/St/Zip ... Use the ship to address.

29. – 31. Phone/Fax/Email ... Use the consumers home phone. You can substitute a cellphone number if a Fax # is not available. Include an email address if at all possible.

32. Winegard Product Model... The model number of the Winegard product being serviced. Look at the instruction manual for this information if it is not on the product.

33. Serial Number... If the product has a serial number, enter it here. Most of the RV satellite products are now serialized. For satellite receivers use the CAID number that begins with R00.

34. Date of Purchase.... This is the date of retail sales to the consumer. Include a copy of the proof of purchase with the Winegard product listed on it. It may be an aftermarket sale or a copy of the RV invoice if the product came installed on the RV. If this information is not provided the warranty date will be the Winegard manufacturing date.

Requirements for a Proof of Purchase.

1. Must clearly state the Winegard product model.
2. Must clearly indicate the date of the retail purchase of the Winegard product.

3. In the case of an OEM installed product, the retail date of purchase of that OEM product with the Winegard product listed on the invoice or the Factory installed options document.
4. Must include the consumers name, address and telephone number.
5. Must include the seller's name address and telephone number.
6. Must be legible at the time of receipt by Winegard Warranty Administration.

Problem Information (This is the problem with the product).

35. **Description of Problem....** The symptoms the consumer is describing for the reason of the service.

36. **Diagnosis...** The Winegard manufacturing error that was determined by the person servicing the product.

37. **Corrective Action...** What was performed to correct the Winegard manufacturing error.

38. **Materials...**Used to correct the problem

Qty...Quantity of the of the parts used

Part # ... The Winegard part number used

Description... A brief description of the part used.

Cost.... The price the dealer paid for the part plus 20% mark up* unless it was sent no charge.

* Individual State laws may apply.

Parts Returned... Check either Y (Yes) or N (No) if the parts were sent back to Winegard. Most parts have to be returned prior to the claim processing unless specifically instructed by Winegard Tech Service Representative not to. See Flat Rate list for those parts that are exempt from being returned.

39. **Labor...**Used to correct the problem

Hours... The number of hours claimed based on the Flat Rate list.

Per hour... The servicing dealers posted shop rate.

40. **Shipping Charges...**

Shipping Method.... Which carrier was used for return shipping.

\$ The reimbursable amount of shipping expenses to return the part. Our UPS account number 530-400 should be used for return shipping expenses.

41. **Miscellaneous Charges**

Other.... Any other reimbursable costs associated with this repair. Must be accompanied by a separate description and receipt.

Example... Custom fees

Tax..... Any reimbursable tax paid by the dealer to effect this service or if labor and parts are required to be taxed locally.

42. **Total Charges** The sum of all of the parts, labor, shipping, other and tax that is reimbursable.

Ship product to:

Technical Services
Winegard Company
2736 Mt. Pleasant Street
Burlington, IA. 52601

Call 319-754-0738 for warranty claim inquiries only.