STANDARD WARRANTY CLAIM FORM

ADDRESS: 3310 S. ARCHER AVE. UNIT C CHICAGO, IL 60608
Tel: (888) 349 – 5618 Fax: (888) 589 – 2749
E-mail: info@ustirex.com Website: www.ustirex.com

Important, Please Read Carefully
If claim is deemed "Non Adjustable" the item will be disposed of after inspection unless the box below is checked.
No Tires/Wheels will be held if the below box not checked.

☐ **RETURN FREIGHT COLLECT**

DISTRIBUTOR/DEALER NAME:			
LOCATION ADDRESS:			
REQUESTED BY:		**DATE SUBMITTED:**	
FAX NUMBER/EMAIL:		**PHONE NUMBER:**	

US TIREX OFFICE USE ONLY
RMA#:
RECEIVE DATE:
OF PCS RETURNED
RECEIVER NAME:

** **IMPORTANT** ** Please complete all non-shaded areas. **ALL** items that are returned to Us Tirex must be accompanied by this form. If you have more than one sheet for the same RMA#, please staple the sheets together. Claim items must be clearly marked with "**RMA# - LINE#**" and the area of defect (or marked "**OOR**" if making a ride distortion claim). Line # should begin with " **1** " and continue in consecutive order until all items have been listed.
Do not ship back items without obtaining RMA # and shipping instructions from Us Tirex Consumer Relations Dept.

LINE #	TIRE SIZE & BRAND	TREAD #	PLY	DOT	RTD /32	DESCRIPTION OF DEFECT	IMAGE #	ADJ CODE
					/32			
					/32			
					/32			
					/32			
					/32			
					/32			
					/32			
					/32			
					/32			
					/32			
					/32			
					/32			

Products that are deemed non-adjustable may be returned to the customer ONLY if customer marks the appropriate area on the RMA form at the time of requesting adjustment and pays for return shipping. All returned products not so marked will become solely property of Us Tirex and may be disposed of