

Revised “ Application Form” for the examination of tyres under complaint (2007)

To maintain your professional image and ensure your customer’s complaint is handled speedily and fairly, please ensure all sections of the form are fully and correctly completed.

The tyre manufacturing industry is constantly seeking to improve standards of customer service. The revised application form is an essential tool to make possible the accurate and speedy resolution of tyre product complaints.

Customer product complaints are often highly emotive, and if the complaint is poorly or incorrectly handled because of insufficient or incorrect information, the result may well be a loss of future business for the dealer and/or the manufacturer.

The details entered on the “Application Form” are the only information, other than the product itself, that the tyre inspector has upon which to base the tyre examination. Many factors influence the service life of a tyre and in order for the examination findings to be fair and accurate the inspector must be in possession of the full facts to ensure the End User receives a professional service.

The Tyre Manufacturers ask for co-operation from both the Dealer and the End User in completing the “Application Form” fully and accurately.

Notes on Completion of “Application Form”

Sections to be completed by Dealer

1) **Dealer 1** – If the dealer in direct contact with the end user has an account with the relevant tyre manufacturer, the full name, address, dealer reference number, date, signature and account number should be entered in this section.

2) **Dealer 2** – If the dealer in direct contact with the end user does not have an account with the relevant tyre manufacturer, the full name, address, dealer reference number, date and signature should be entered in this section. **(After sections 2,3,4,5 & 6 have been fully completed, send the form and the product to your normal supplier of the relevant tyre)**

Section to be completed jointly by Dealer & End User

3) **Details of Tyre, Tube or Flap** – The information required in this section is needed to ensure the correct product is examined and its full service history is known to the tyre inspector.

Sections to be completed by the End User

4) **Vehicle Details** – The performance and use of the vehicle have a large influence on the service life of the tyre and it is very important the manufacturer is aware of these details.

5) **Name & Full Address of User** – So that the examination result can be communicated to the End User and/or if any additional information is needed, the full address and daytime telephone number are required. If the person making the application is not the end user, details of both the applicant and end user should be entered.

6) **End User’s Signature** – The form details conditions of examination and User declaration statements it is important for the protection of both the Dealer and Manufacturer that the User reads and understands the conditions and signs the form as an indication of acceptance of the conditions.

APPLICATION FORM FOR TYRE EXAMINATION
TO ENSURE A PROMPT AND ACCURATE ASSESSMENT OF THE COMPLAINT, ALL PARTS OF THIS FORM MUST BE FULLY COMPLETED BY BOTH THE DEALER AND USER. IT IS ALSO REQUIRED THAT BOTH DEALER & USER SIGN THE RESPECTIVE PARTS OF THE FORM. FAILURE TO DO SO WILL RESULT IN DELAYS IN PROCESSING AND POSSIBLY AN INAPPROPRIATE CONCLUSION. IT IS IMPORTANT WHEN RETURNING TYRE TYPE TUBES TO ALSO RETURN THE TUBE (AND FLAP).

Collection Note Number
Manufacturer's Report Reference

<p>NAME & FULL ADDRESS OF DEALER (1) (Block Letters)</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>	<p>NAME & FULL ADDRESS OF DEALER (2) (Block Letters)</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
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DETAILS OF TYRE, TUBE OR FLAP

Make Size Index Speed Symbol

Pattern DOT/Serial No's No. of tyres New? Remould?

Was the product Original Equipment on the vehicle? Yes No IF NO, when purchased?

Tyre Mileage Wheel Position When purchased was the product part worn? Yes No

DESCRIPTION OF COMPLAINT

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VEHICLE DETAILS

Registration No. Make Year

Engine c.c./H.P. Usage Speedometer Reading

NAME & FULL ADDRESS OF USER (Block Letters) (If the applicant is not the User of the product, please enter both the User's name and address and the name and address of the contact person handling this application on their behalf)

Mr / Mrs / Ms Post Code

Daytime Tel. No. Fax No. Email

CONDITIONS OF EXAMINATION

1. The product may be made unserviceable by the procedures necessary to complete the examination.
2. If an allowance is granted the product may be disposed of.
3. If an allowance is not granted, the product may be returned to the Dealer through whom it was returned, OR the Manufacturer will be entitled to safely dispose of it, unless within 28 days of the date of the manufacturer's examination report, I/We have notified the Manufacturer in writing that I/We require the product to be returned. In the latter event, there may be a charge to cover the cost of carriage.
4. Any concession granted by the Manufacturer (or authorised agent) will be a gesture of goodwill only, and will not constitute any admission of liability, nor imply a fault in the product.

These conditions do not affect your statutory rights

USER'S DECLARATION

1. I/We certify that the product referred to above is my/our property and was fitted to my/our vehicle of which details are given above. *

2. I/We consider the product has not given satisfactory service whilst on my/our vehicle and request you arrange examination by the manufacturer. *

3. I/We declare that the above mentioned tyre/tube caused no damage to vehicle or injuries to people and hence no consequential claim will be made related to the tyre/tube detailed on this form. *

4. I/We declare the details entered here on my/our application to the best of my/our knowledge and belief. *

5. I/We agree that my/our personal data set out in this Form may be entered on computer records, and also passed on to the Manufacturer of the product in order to deal with this application. *

I have read and agree to the conditions of examination given above. (*Delete if inappropriate)

USER'S SIGNATURE **PRINT NAME** **DATE**

APPLICATION FORM FOR TYRE EXAMINATION

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IT IS IMPORTANT WHEN RETURNING TUBE TYPE TYRES TO ALSO RETURN THE TUBE (AND FLAP).

Collection Note Number

Manufacturers Report Reference

NAME & FULL ADDRESS OF DEALER (1) (Block Letters)
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Post Code

Dealers Reference.....Date.....
Dealers Signature.....
Account No. with Manufacturer.....

NAME & FULL ADDRESS OF DEALER (2) (Block Letters)
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.....
Post Code

Dealers Reference.....Date.....
Dealers Signature.....

DETAILS OF TYRE, TUBE OR FLAP

Make..... Size..... Load Index..... Speed Symbol

Pattern..... DOT/ Serial No's..... No. of tyres New? Remould?

Was the product Original Equipment on the vehicle? Yes No If NO, when purchased?.....

Tyre Mileage..... Wheel Position..... When purchased was the product part worn? Yes No

DESCRIPTION OF COMPLAINT.....

VEHICLE DETAILS

Registration No..... Make..... Model..... Year.....

Engine c.c./ H.P..... Usage..... Speedometer Reading.....

NAME & FULL ADDRESS OF USER (Block Letters) (If the applicant is not the User of the product, please enter both the User's name and the name of the contact person handling this application on their behalf)

Mr / Mrs / Ms

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.....
.....
Post Code.....

Daytime Tel. No..... Fax No..... Email.....

CONDITIONS OF EXAMINATION

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2. If an allowance is granted the product may be disposed of.
3. If an allowance is not granted, the product may be returned to the Dealer through whom it was returned, OR the Manufacturer will be entitled to safely dispose of it, unless within 28 days of the date of the manufacturers examination report, I/We have notified the Manufacturer in writing that I/We require the product to be returned. In the latter event, there may be a charge to cover the cost of carriage.
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2. I/We consider the product has not given satisfactory service whilst on my/our vehicle and request you arrange examination by the manufacturer. *
3. I/We declare that the above mentioned tyre/tube caused no damage to vehicles, property or injuries to people and hence no consequential claim will be made related to the tyre/tube detailed on this form. *
4. I/We declare the details given above are correct to the best of my/our knowledge. *
5. I/we agree that my/our personal data set out in this Form may be retained by the Dealer in its computer records, and also passed on to the Manufacturer of the product in order to deal with this application. *

I have read and agree to the conditions of examination given above. (*Delete if inappropriate)

USER'S SIGNATURE.....**PRINT NAME**.....**DATE**.....