

# 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 TUBE TYPE TYRES TO ALSO RETURN THE TUBE (AND FLAP).**

Collection Note Number

Manufacturer's Report Reference

## NAME & FULL ADDRESS OF DEALER (1) (Block Letters)

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.....  
.....  
.....  
.....  
.....  
**Post Code** .....

Dealer's Reference.....Date.....

Dealer's Signature.....

Account No. with Manufacturer.....

## NAME & FULL ADDRESS OF DEALER (2) (Block Letters)

.....  
.....  
.....  
.....  
.....  
.....  
**Post Code** .....

Dealer's Reference.....Date.....

Dealer's 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 .....

.....  
.....  
.....  
**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 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.
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 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.....

SEE OVERLEAF FOR INSTRUCTIONS ON COMPLETING THIS FORM

Printed and supplied by the British Tyre Manufacturers Association Tel. 01787 226995 Fax. 0845 301 6853

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