

ADA Racing®
1292 W. Harwell Rd.
Gilbert, AZ 85233
Tel: (480)507-6919

Warranty Claim Form

(you must send this along with the product being return for warranty inspection)

RGA(Return Goods Authorization)#: _____
You must contact ADA Racing® to obtain an RGA#, before sending a product in for warranty.
The RGA# must be clearly written on the outside of the box that the part is being returned in.

Name/Company Name: _____

Date: _____ Phone #: (____) _____

Original ADA Racing® Invoice#: _____

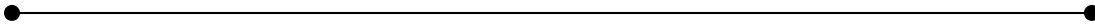
Description of Damage: _____

Dealers Only:

Your Customers Name _____ Your Invoice Number _____

Date of Your Invoice _____

Dealer, you MUST include a copy of original sales receipt with customer's name and date.



Below to be filled out by ADA Racing

Date Received: _____ Date Completed: _____

Warranty Approved or Declined: _____

Approved/Declined By: _____

Exchange or Credit: _____

If Credit, enter amount: _____