



RIPS, TEARS, PUNCTURES AND BURNS CLAIM FORM

**In an effort to expedite the processing of your claim,
please email it directly to our claims department ~ claims@ecpinc.net**

Please be sure to include the following information in order to expedite the processing of your claim:

- ◆ Copy of your Warranty AND Motor Vehicle Registration
- ◆ **Color Photos of the Damage**

RIPS, TEARS, PUNCTURES & BURNS WARRANTY CLAIM FORM					
NAME:				DATE:	
ADDRESS:					
CITY:		STATE:	ZIP:		
HOME PHONE:			WORK PHONE:		
EMAIL ADDRESS:					
YEAR:	MAKE:	MODEL:	VIN NUMBER:	CURRENT MILEAGE:	COLOR:

PLEASE COMPLETE THE FOLLOWING

Please provide the date the damage was initially identified:

ONCE ALL DOCUMENTATION IS RECEIVED, PLEASE ALLOW 24 HOURS (3-BUSINESS DAYS) FOR A RESPONSE.
(PLEASE SEND ALL CORRESPONDENCE VIA EMAIL IN JPG FORMAT)

WARRANTY NUMBER:

I Certify that the above information is correct and accurate to the best of my knowledge.

Signature

Date

IMPORTANT INFORMATION:

Repairs should not be performed until written authorization has been received by our Claims Department. **Any unauthorized repairs will not be reimbursed.**
Thank You!

RIPS, TEARS, PUNCTURES & BURNS CLAIM FORM

*We have received your claim requesting your interior to be cleaned. In order to proceed with the processing of your claim, please check the appropriate box(es) and return to our office within thirty (30) days from the date referenced above. If this is **NOT** returned within thirty (30) days, this file will be considered closed for no response.*

Please identify the type of damage.

Rip

Tear

Puncture

Burn

Please put an "X" next to all that apply:

- | | |
|--------------------------|---------------|
| <input type="checkbox"/> | Leather/Vinyl |
| <input type="checkbox"/> | Fabric |
| <input type="checkbox"/> | Carpet |
| <input type="checkbox"/> | Dash |

Please indicate location of rip, tear, puncture or burn:

- | | | |
|--------------------------|------------|-------|
| <input type="checkbox"/> | Seat | _____ |
| <input type="checkbox"/> | Console | _____ |
| <input type="checkbox"/> | Door Panel | _____ |

Please specify the length and/or diameter of the damaged area:
