



# WARRANTY CLAIM PROCEDURE

# I.1) Defective Product Form

|   |                            |   |                            |
|---|----------------------------|---|----------------------------|
|   |                            | <b>DEFECTIVE PRODUCT FORM</b>                           |                            |
| Send filled in form to : <a href="mailto:claims@sogefigroup.com">claims@sogefigroup.com</a>   |                            |   |                            |
| CUSTOMER STAMP<br><small>or Customer information (Company name, address, tel.)</small>  |                            | DATE  |                            |
|   |                            |   |                            |
| <i>By submitting the filter to SOGEFI GROUP the Customer authorizes SOGEFI to carry out all necessary tests for the analysis even if they are destructive</i> |                            |   |                            |
| <b>FILTER INFORMATION</b>   |                            | <b>VEHICLE INFORMATION</b>                              |                            |
| BRAND   |                            | CAR BRAND AND TYPE                                      |                            |
| FILTER TYPE   |                            | ENGINE TYPE<br><small>(displacement, fuel type)</small> |                            |
| REF. CODE   |                            | ENGINE POWER (KW)                                       |                            |
|   |                            | DATE FIRST REGISTERED<br><small>(Month/Year)</small>    |                            |
|   |                            | CAR MILEAGE (Km/Miles)                                  |                            |
| PROBLEM / DAMAGE DESCRIPTION  |                            |   |                            |
| <b>In case of vehicle damage please fill in the following cells</b>   |                            |   |                            |
|   | FILTER ASSEMBLED ON [date] | KM/MILES MADE WITH FILTER                               | REQUESTED COMPENSATION (€) |
|    |                            |   |                            |



**All parts of the form shall be completely filled in.**

In case some information are missing analysis will take much longer time.

## I.2) E-mail Address

● **Defective Product Form** shall be sent by e-mail to the following address:

[claims@sogefigroup.com](mailto:claims@sogefigroup.com)

● The email's subject shall be written as follows:

|                          |  |
|--------------------------|--|
| <i>E-mail subject</i>    | [BRAND]_[REF. CODE]_[CUSTOMER NAME]_YYYYMMDD_WARRANTY_VEHICLE  |
| <i>e-mail attachment</i> | DEFECTIVE PRODUCT FORM   |
| <i>remarks</i>           | <i>Please do always use capital letters for e-mail subject</i>   |
|                          | <i>YYYYMMDD is the date of the claim (YEAR MONTH DATE).</i>  |
| <i>example</i>           | Customer " <u>GAMMADELTA</u> " makes a warranty claim on 25/12/2011 because he deems that PURFLUX product with ref. code "B1234" damaged his car |
|                          | PURFLUX_B1234_GAMMADELTA_20111225_WARRANTY_VEHICLE   |

**Don't forget to attach the "Defective Product Form » !**

## I.3) Shipment of Product

Products shall be sent to the following address (**ALWAYS accompanied** by respective Defective Product Form):

**SOGEFI GROUP**  
**Filtrauto S.A. - Aftermarket Division**  
*Quality Dept. – Technical Service*  
7 Avenue du 8 mai 1945  
78286 Guyancourt cedex  
FRANCE



**In no cases, products shall be opened by the Customer in advance, unless otherwise agreed with SOGEFI personnel**

# II. Warranty Claim Analysis

An email will be sent to the Customer on receipt of the part.

Analysis will take:

- **3 weeks** in case of 1st level analysis.
- **5 weeks** in case of 2nd level analysis.