

WARRANTY PRE-AUTHORIZATION REQUEST

Service Center Name _____
 Address _____
 Phone Number _____

Today's Date _____
 Contact Name _____
 Contact Phone/Ext _____
 Contact E-mail _____

17 Digit VIN No. _____
 Last 7 Quantum Module No. _____
 Date of Purchase _____

Year/ Model _____ Make _____
 Mileage _____ Product Type _____
 Date of Repair _____

#1 Is this a Safety or Regulatory Concern? Yes No

(Check one if applicable. If yes, please explain in Remedy box below)

Problem

Cause

Remedy

Labor Time Requested _____ Labor Time Approved _____

#2 Is this a Safety or Regulatory Concern? Yes No

(Check one if applicable. If yes, please explain in Remedy box below)

Problem

Cause

Remedy

Labor Time Requested _____ Labor Time Approved _____



Do not complete. This section is for Quantum Fuel Systems.

Labor Code	Photos Needed	Requested Date
_____	_____	_____
Trouble Code	Need More Info	Requested Date
_____	_____	_____

Labor Code	Photos Needed	Requested Date
_____	_____	_____
Trouble Code	Need More Info	Requested Date
_____	_____	_____

Quantum Comments



25242 Arctic Ocean Drive, Lake Forest, CA 92630
 Toll Free: 1-800-816-8691

Authorization Number: Authorization _____
 Date: Authorization Number _____
 Provided By: _____