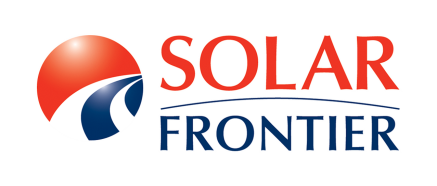
**** WA99-0017 Claim Procedure Manual for Overseas – Annex A

**Claim Form**

Please complete the following form and send it back in WORD format to your Solar Frontier contact person. If you have a warranty, please also attach a copy for our reference. Your contact person will then issue you with a claim number. Please keep and refer to this number when making inquiries about your claim. Your cooperation is greatly appreciated.

|  |  |  |
| --- | --- | --- |
| Case or Claim Number |  | To be filled in by Solar Frontier |
| Claim Date |  |
| Claim Title |  |
|  | | |
| Agent Information | | |
| Company Name |  |  |
| Address |  |  |
| Postcode |  |  |
| Contact Person |  |  |
| Phone |  |  |
| Email |  |  |
| FAX |  |  |

|  |  |  |
| --- | --- | --- |
| End User Information | | |
| Company Name |  |  |
| Address |  |  |
| Postcode |  |  |
| Contact Person |  |  |
| Phone |  |  |
| Email |  |  |
| FAX |  |  |

|  |  |  |
| --- | --- | --- |
| Consignee Information in case of Replacement (if available) | | |
| Company Name |  |  |
| Address |  |  |
| Postcode |  |  |
| Contact Person |  |  |
| Phone |  |  |
| Email |  |  |
| FAX |  |  |

|  |  |  |
| --- | --- | --- |
| Delivery Information in case of Replacement (if available) | | |
| Company Name |  |  |
| Address |  |  |
| Postcode |  |  |
| Contact Person |  |  |
| Phone |  |  |
| Email |  |  |
| FAX |  |  |

|  |  |  |
| --- | --- | --- |
| System Information | | |
| Site Name |  |  |
| Original Purchase Date |  | if you know right now |
| Invoice No. |  | if you know right now |
| Connection Date |  |  |
| Size (kW) |  |  |
| Quantity (pcs) |  |  |
| Module Type |  | E.g., SF165-S |
| Application Type |  | E.g., residential, commercial, utility-scale |
| Country |  |  |
| Location of Modules  (Site Address) |  |  |

|  |  |  |
| --- | --- | --- |
| Details of Claim | | |
| Date of Failure Occurred |  |  |
| Number of Products Affected (pcs) |  | Please provide the serial number of affected products only. |
| Serial Number(s) of the Products Affected |  |  |
| Claim Type |  | E.g., low power, appearance, frame, glass, junction box, cable, connector, packaging and/or other. |
| Detailed Description of Claim |  |  |
| Desired Response |  | How would you like Solar Frontier to respond to your claim? |
| Product Warranty |  | E.g., 5 years please provide original warranty document (.pdf) for workmanship and power output, thank you. |
| Power Output Warranty |  | E.g., Step warranty: 90% for 10y and 80% from 11y to 25y |

|  |
| --- |
| Photos |
| Please provide a minimum of four (4) photos. One photo should show the entire system. The other photos should clearly demonstrate the problem. Please ensure photos are taken with adequate lighting, especially in case of Glass broken and Junction box fallen, please take photos in high definition and/or close-up for clearly confirmation per module. |

Photo 1: Entire system

Photo 2: Entire module

Photo 3: Zooming specific part of affected

Photo 4: other