601 Lincoln Ave NW
Huron, SD 57350
866-250-7624
www.larsonct.com

Warranty claim form

Please return form with defective part to Larson Cable Trailers (Attn: Warranty) as soon as possible.

Trailer Information

Date of purchase: _____ Date of failure: _____

Trailer VIN #: | | | | | | | | | | | | | | | | |

Honda Engine Serial number (if engine related failure): _____

Who is submitting this claim: Dealer ☐ Customer ☐

Dealer Information

Dealer name/Location: _____

City:_____ State: _____

Contact: _____ Phone: _____

Email: _____

Customer Information

Company name: _____

City: _____ State: _____

Contact: _____ Phone: _____

Email: _____

Claim Details (be as specific as possible)