LIMITED WARRANTY REGISTRATION FORM

THIS DOCUMENT MUST BE RETURNED IN ORDER TO REGISTER YOUR ENGINE/CYLINDER HEAD FOR ANY FUTURE WARRANTY CLAIMS. ALL INFORMATION MUST BE COMPLETE OR IT WILL NOT BE PROCESSED.
NO WARRANTY CLAIMS CAN BE STARTED WITHOUT THIS INFORMATION.

Limited Warranty is not valid until this form AND a copy of the INSTALLATION REPAIR ORDER/INVOICE is received by Reviva. Warranty begins at the date of installation or 30 days from date of shipment, whichever comes first
**Please send your registration information and installation invoice/repair order via one of the following:
E-mail: Registration@Reviva.com Fax: 763-390-3156 Mail: ATTN: WARRANTY 5130 Main St NE Fridley, MN 55421

SECTION 1   ENGINE INFORMATION/CYLINDER HEAD INFORMATION

Reviva Engine Serial Number:
  Engine/Cylinder Head

Reason for Engine Replacement:

SECTION 2   ENGINE OWNER/CYLINDER HEAD OWNER

Company Name: _____ Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

SECTION 3   ENGINE INSTALLER/CYLINDER HEAD INSTALLER

Company Name: _____ Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

SECTION 4   VEHICLE INSTALLATION INFORMATION

Date Installed: _____ Odometer @ Install: _____

Hours @ Install: _____ VIN or NDA#: _____

Make: _____ Model: _____

Year: _____ Application: _____

Installation RO or installer invoice #: _____ **(copy must be attached to this form to finalize registration process)**

SLIC Code (UPS Only): _____ Unit/Car Number: _____

The information used in this form will be used to determine warranty coverage and payment should a claim occur.
Incomplete information will not be processed.

Signature: _____ Print Name: _____

Title: _____ Date: _____

For questions or concerns please call 763.971.6243

REVIVA®

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