



dal 1860

CLAIM FORM

1. **MODEL** _____
- a. **BOOTS SIZE** _____
- b. **CALF SIZE** _____
2. **PURCHASE DATE (from final customer)** _____
3. **FAULT PICTURE (you can send by e-mail)**
4. **PRODUCTION NUMBER:**
(the number printed inside the boot calf) _____
5. **FAULT:**
- ZIP
 - LEATHER
 - OTHER
6. **FAULT DESCRIPTION** (how the boots were used, how the rupture happened, how long they were used for, how often, if they were well cleaned all the time, etc.)
- _____
- _____
- _____
- _____

COMPANY NAME :
