



SR Suntour New Zealand Service request form:

Please fill out and include this service form with your fork or shock.

Shop Name:

Address:

Store Contact Person:

Phone:

Mobile:

Email:

Bike Make, Model, Year:

Bicycle Serial Number:

Fork/ Shock model, (eg: SF14-XCT-DS-MLO-27.5-100)

Fork Serial Number:

Issue with Fork/ Shock:

Is this a warranty issue?

Yes

No

(If yes, please provide proof of purchase—original purchaser only)

Date sent:

Customer comments:

Marleen Wholesalers use only:

Arrival Date:

GT Order #:

Date returned:

GT Order #:

Comments:

**MARLEEN WHOLESALERS LTD
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