





## CS-00017 Annulus Gear Inspection Report

Dealer Name	Inspector Name

2X2 VIN/PIN Number			
Front Motor Serial		Rear Motor Serial	
Front Motor Inspection Result		Rear Motor Inspection Result	
OK 	NG 	OK 	NG 

Inspection Date:	
Inspector Signature:	
Service Manager Signature:	

Please ensure that this form is fully completed and submitted as part of the claim process.  
Claims are to be submitted following normal warranty procedures.