

# DCBH Warranty Diagnostic Information Sheet

DATE: \_\_\_\_\_

DCBH Part BA- \_\_\_\_\_

## Vehicle Information

Year/Make/Model \_\_\_\_\_

**Prior to Removing the Battery Pack from the Vehicle**, acquire all Battery Pack or Battery System Diagnostic Trouble Codes (including any Information or Sub-Codes). Please list the codes on the lines below:

\_\_\_\_\_  
\_\_\_\_\_

DCBH Battery Serial Number: MI \_\_\_\_\_

Battery State of Charge (SOC): \_\_\_\_\_%      Current Mileage: \_\_\_\_\_

Date Battery was installed into vehicle: \_\_\_\_\_

Repair Center Name: \_\_\_\_\_

Technician Name (Please Print): \_\_\_\_\_

Contact phone number: \_\_\_\_\_

Contact email: \_\_\_\_\_

## DO NOT COMPLETE – FOR INTERNAL PURPOSES ONLY

Registered: Yes \_\_\_\_\_ No \_\_\_\_\_      Date installed: \_\_\_\_\_

Mileage at install: \_\_\_\_\_      DCBH Invoice: \_\_\_\_\_

Remaining Warranty Miles: \_\_\_\_\_      Years: \_\_\_\_\_

## DISTRIBUTOR INFORMATION

Distributor: \_\_\_\_\_      Contact name: \_\_\_\_\_

Email: \_\_\_\_\_      Phone: \_\_\_\_\_

Date: \_\_\_\_\_      Approved by: \_\_\_\_\_

Ship to: \_\_\_\_\_

Address: \_\_\_\_\_

PO#: \_\_\_\_\_      WRA #: \_\_\_\_\_

Email completed form to [warranty@dcbatteryhub.com](mailto:warranty@dcbatteryhub.com) or fax to 616.399.9174