



Spicer® Extended Protection Plan (EPP) Application and Registration Form

Please fill out the form below. Once completed, click "Save As" to rename the file and save it to your computer. You can e-mail the completed form as an attachment to eppregistrations@dana.com or print out the form and mail it to the address below.

Step 1: Enter owner/dealer information and select "Bill to" choice (check appropriate box).

<input type="radio"/> Bill to Owner		<input type="radio"/> Bill to Dealer / Dealer Code:	
Owner:		Dealer:	
Address:		Address:	
City:		City:	
State/Province:	Postal Code:	State/Province:	Postal Code:
Contact Name:		Contact Name:	
Contact Phone:		Contact Phone:	
E-mail Address:		E-mail Address:	

Step 2: Enter vehicle and component information.

OEM:	Date in Service:	<input type="radio"/> Year 1 <input type="radio"/> Year 2 <input type="radio"/> Year 3
Current Odometer Reading:	<input type="radio"/> Miles <input type="radio"/> Kilometers	Vehicle In-Service Year:
<u>Vehicle Vocation (choose only one):</u>		Chassis VIN (17 digits):
<input type="radio"/> Linehaul		
Standard Duty:		
<input type="radio"/> Construction <input type="radio"/> City Delivery <input type="radio"/> Fire Service <input type="radio"/> Rescue Vehicle <input type="radio"/> Recreation Vehicle <input type="radio"/> Transit Coach <input type="radio"/> School Bus		
Severe Duty:		
<input type="radio"/> Off-Highway <input type="radio"/> Agriculture <input type="radio"/> Heavy Haul <input type="radio"/> Logging <input type="radio"/> Mining <input type="radio"/> Oil Field <input type="radio"/> Refuse <input type="radio"/> Yard Tractor <input type="radio"/> Intercity Bus		

Step 3: Select desired coverage (check all that apply and provide requested information). Please refer to the Spicer® Protection Plan Tables.

Drive Axle:	<input type="checkbox"/> None <input type="checkbox"/> Option #1 <input type="checkbox"/> Option #2 <input type="checkbox"/> Option #3 - if selected, please provide		
Axle Model:	Axle #1 Serial Number (S/N):	Axle #2 Serial Number (S/N):	Axle #3 Serial Number (S/N):
<small><u>Note:</u> If you have a tandem axle, complete Axle S/N 1 and 2 above. If you have a tridem axle, complete Axle S/N 1, 2 and 3 above.</small>			
Steer Axle:	<input type="checkbox"/> None <input type="checkbox"/> Option #1 <input type="checkbox"/> Option #2 <input type="checkbox"/> Option #3 - if selected, please provide		
Steer Axle Model:	Steer Axle Serial Number (S/N):		

Step 4: Purchaser signature.

Coverage under the Extended Warranty Plan is only effective upon successful payment being received by Dana, and is subject to the terms and conditions of the Warranty Manual and Warranty Guide.

By:	Date:
-----	-------

Step 5: Mail or e-mail this completed form to:

Mail to:	Dana Advanced Manufacturing Center 6515 Maumee Western Road Maumee, Ohio 43537 Attn: Warranty Dept EPP Registration	E-mail to:	eppregistrations@dana.com	EMAIL FORM ▶
----------	------------------------------------------------------------------------------------------------------------------------------	------------	--------------------------------------------------------------------------	------------------------------

NOTE: Do not include payment. Once qualified, you will be contacted by EPP Registrations on payment instructions. (Canadian orders will be billed in USD).

