

Warranty Claim Form Phone: 1-800-292-4359

Fax: 1-866-396-3137

e-mail: ps-optima-orders@jci.com

Claim Number		Date				1
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Submit claims to Optima Batteries, Inc. within 30 days after receipt of the battery.

Α		В				С					D			E	F	:	G	Н	I
Jobber	Item #	Model			Batt	ery I.I	D.				ircular ode S			Visual Inspection	Volt Minimu	age m Volts	Charge	Load Test	Application
		25 35 800S 34 800U 34/78 850/6 6V 1000M 34M D31M 75/25 78 D75/25 D75/25 D75/25 D750S D34 D750U D34/78 D750/6 D6V D900M D34/M D51-D51R D31 A/T/M D27M D27F Do Not Use Part Numbers	Ma	Loca NO	Ex 8030 ated o	ample 060789 on batte	ery ca	E		S C	Date code 2-character code on circular date code sticker located on battery top or battery cell Example: A 1		A t	Record observation below: Damage=Abuse Alteration, etc. to terminals and/or case Example: Post Damage Hole/Case If damaged, describe the damage here, then STOP Battery is not covered If no damage, write "OK" Go to Voltage Column	12-Volt Battery 12.6 Volts 6-Volt Battery 6.3 Volts Record: Incoming open circuit voltage (OCV) If > minimum, go to Load Column If < minimum, go to Charge Column	Connect battery to charger for 5 minutes or until Amp Meter indicates current flow If battery accepts charge, recharge battery. Record open circuit voltage (OCV) If battery does not accept charge, write "FAIL" battery is covered Go to Load Column	Discharge in AMPS at half the rated CCA of the battery for 15 seconds 12-Volt Battery Minimum Voltage: ≥9.6V at 70°F (21°C) ≥9.4V at 50-69°F (10-20°C) 6-Volt Battery Minimum Voltage: ≥4.8V at 70°F (21°C) ≥4.4V at 50-69°F (10-20°C) If > minimum, write "PASS" battery is not covered If < minimum, write "FAIL" battery is covered	Auto Personal Enter: A Commercial Business Enter: B	
	1									1									
	2]									
	3																		
	4									1									
	5									1									
	6									1									
	7									1									
	8									1									
	9									1									
	10									1									

Pistributor	Phone	Inspected by
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