

SAF® Tire Pilot Plus™ (TPP) Tire Pressure Management System - All Variants North American (NA) Commercial Warranty



SAF-HOLLAND's Commitment

We warrant each SAF Tire Pilot Plus (TPP) System manufactured after January 1, 2019, when properly installed on your vehicle, and maintained and operated in accordance with our requirements. SAF-HOLLAND® will, at its option repair, replace or reimburse due to defects in material or workmanship. Parts reimbursement is limited to the parts acquisition cost, not to exceed the suggested list price. The cost of labor covered by this warranty includes any reasonable labor expense. Labor reimbursement is based on a published flat rate schedule in conjunction with local labor rates.

Your Responsibilities

You are responsible for proper installation, operation, and maintenance as specified in our applicable publications for SAF CBX and ULX Systems and for using the product in recommended applications within rated capacities. Please reference the SAF Tire Pilot Plus Installation Manual (XL-AS20015BM-en-US) for additional details.

Claims

You are required to obtain prior authorization from an authorized SAF-HOLLAND customer service representative before replacing or returning any part. You are required to retain the product or part claimed to be covered by this warranty and return it to SAF-HOLLAND upon request. You must submit a valid Service Report to have your warranty request considered. NOTE: See backside of this document for Warranty Request Form.

Application Limitations

Please reference the SAF Trailer Application Guide noted below for definitions and recommendations:

XL-MP20033SG-en-US

Exclusions and Limitations

This warranty does not cover coatings and any SAF axle or component that is altered without written permission, or fails, malfunctions or is damaged as a result of accident, abuse, or improper installation, maintenance or use. Warranty excludes normal wear.

THIS WARRANTY IS OUR SOLE WARRANTY IN REGARDS TO THE COVERED SAF AIR RIDE AND MECHANICAL SUSPENSION AND AXLE SYSTEM. WE MAKE NO OTHER WARRANTIES, EXPRESS OR IMPLIED, OR OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. IN NO EVENT SHALL WE BE RESPONSIBLE FOR SPECIAL, INCIDENTAL, OR CONSEQUENTIAL DAMAGES OF ANY KIND INCLUDING, BUT NOT LIMITED TO TOWING, DOWNTIME, LOST PRODUCTIVITY, CARGO DAMAGE, TAXES, OR ANY OTHER LOSSES OR COST RESULTING FROM A DEFECTIVE COVERED COMPONENT.

Coverage Periods

Tire Pilot Plus Components		Standard/ Moderate Duty	On Road/ Severe Duty	Off Road/ Severe Duty
Axle Hose and Spindle Plug Assembly	Parts/Labor	5/5 Years	2/2 Years	1/1 Year
Controller Assembly	Parts/Labor	5/5 Years	2/2 Years	1/1 Year
Wiring Harness	Parts/Labor	5/5 Years	2/2 Years	1/1 Year
Tire Hoses	Parts/Labor	5/5 Years	2/2 Years	1/1 Year
Hub Cap Assembly	Parts/Labor	5/5 Years	2/2 Years	1/1 Year
Other Components	Parts/Labor	3/1 Years	1/1 Year	1/1 Year
Retro Fit Kits				
All Components SAF Axle	Parts/Labor	3/1 Years	1/1 Year	1/1 Year
All Components Non SAF Axle	Parts/Labor	1 Year/NA	1 Year/NA	1 Year/NA

SAF Tire Pilot Plus (TPP) Tire Pressure Management System



Warranty Request Form

USA SAF-HOLLAND, Inc. P.O. Box 425 Muskegon, MI USA 49443-0425 CANADA P.O. Box 1639 Muskegon, MI

Muskegon, MI USA 49443-0425

Fax: 800.356.3929

Fax: 800.356.3929

INSTRUCTIONS:

- Please complete all of the information requested on this report by filling in all appropriate fields.
- iPhone/iPad users fillable function only works with Adobe Acrobat app available free in the app store.
- Click here to submit completed report to SAF-HOLLAND Customer Service, or Click here to print a copy and fax to one of the numbers listed above.
- On receipt of the report, SAF-HOLLAND will send you a claim number. It is important to keep this claim number as it applies to the complete handling of this transaction, such as inquiries, correspondence, etc.
- You may be required to return claim part(s) or supply for photos for evaluation.
- Submit invoice for payment using the SAF-HOLLAND authorization number.

SAF-HOLLAND USE Only

Claim Number

Reference

COMPANY	ADDRESS	ΔNID	CONTA	CT PFRS	ON
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Contact Company:		Contact Name:				
Street Address:						
City:		State/Prov.:	Zip Code:			
Phone: Fax:		E-Mail Address:	E-Mail Address:			
VEHICLE OWNER - F	PURCHASER					
Contact Company:		Contact Name:				
Street Address:						
City:		State/Prov.:	Zip Code:			
Phone:	E-Mail Address:		Vehicle Unit Number:			
Suspension/axle Serial #: Control Box Serial Date Code Original Tire Pressure Setting Desired Tire Pressure Setting Trailer Configuration - numb	e: g (sticker) per of axles on TPP system	PSIG	rial Tag and Control Box Location:			
Tire Type - (duals or WBS) Complaint:						