Leatt Warranty Form (for Dealers)

v11.20.25

1) Dealer Information

Dealer Contact:

Dealer Code (DLR):

*Dealer/Store Name:

***Dealer's Customer's Name*:

2) Purchase & Item Information

*Dealer PO#:

*B2B Web ID# (*input five remaining digits*): 90000

Leatt Invoice #:

*Dealer's Date of Purchase (from Leatt):

*Product Part#:

*Full Product Description:

Current Location of Item in Question:

***Customer's Date of Purchase from Dealer*:

3) Claim Details

*Was the item/user involved in any falls, drops, crashes, or impacts? (YES or NO only):

*Consumer or Purchaser Statement:

4) Photo Images

*Please take and provide the following **images** along with your completed form (**.jpeg preferred**):

- one full product front (as a pair, if paired product)
- one full product back (as a pair, if paired product)
- Six-digit Production/PO number found in or on the product (as a tag, label, or sticker)
- Area(s) in question or product issue

Leatt Warranty Terms & Conditions: https://us.leatt.com/policies/terms-of-service

*Denotes a required field

**Denotes a required field for claims on items purchased from the Dealer by end-consumer

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