



## Warranty Registration

Circle one:            Distributor            Dealer            End User

Contact Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Which Godwin Group Product:

Circle One:	Godwin Mfg. Co., Inc	Galion-Godwin	Champion
R/S Godwin	Williamsen-Godwin	Good Roads	

Unit Model Number: \_\_\_\_\_

Unit Serial Number: \_\_\_\_\_

Vin# of Truck: \_\_\_\_\_

Make and Model of Truck: \_\_\_\_\_

What Industry are you in: \_\_\_\_\_

Date of Purchase: \_\_\_\_\_