I Y KE CLAIM APPLICATION FORM			
Customer Information		Tyre Details	
Name	Telephone No.	Size	Ply Rate
Country	Fax No.	Pattern Design	Left Tread Deepth(mm)
Country	1 dx 110.	I attern Design	Left Head Deepth(iiiii)
Claim Date	E-mail	Tyre Serial Number	Dot Number
Whole Tyre Picture		Defect Detail Picture	
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