



Case # AM _____

Authorization # ARM _____

PRE-CALL WORKSHEET

*Meritor ID Number: _____

*Vehicle Information

*17 Character VIN Number: _____ Vocation: _____

*Vehicle Make: _____ Vehicle Model: _____

*Owner/Fleet Name: _____ Unit #: _____

*In Service Date: _____ Vehicle Build Date: _____
MM/DD/YYYY MM/DD/YYYY

*Part/Component Information

*Meritor Component Model Number: _____

*Meritor Component Serial Number: _____

*Repair Facility Information

*Contact Persons Name: _____ *Phone: _____

Work Order Number: _____ Email Address: _____

*Failure Date: _____ *Odometer: _____ MI KM Hrs
MM/DD/YYYY

Warranty Coverage OEM Meritor

*Work Details/Customer Complaint

Empty box for work details/customer complaint

Service Part Only

Component Purchase Date: _____ Original Invoice Number: _____
MM/DD/YYYY

Mileage On Component: _____

Assistance: 1-866-OnTrac1 (1-866-668-7221) Fax: 1-248-435-5580 E-Mail: OnTrac@Meritor.com

*Required Field



Revised 4/19