

RV CERTIFICATION FORM

Motor Homes complete 1-12 and 19-34 ★ Travel Trailers, 5th Wheel and Pop-Ups complete 19-34

This Certification form must be:

- 1) Completed and all items either checked-off under OK or Repairs Completed;
- 2) Signed by the technician performing the inspection and the Service Manager certifying that this vehicle has met all Certification standards; and
- 3) 1 copy must be retained along with repair orders, in the vehicle's file and 1 copy must be submitted with the RV Certified Limited Warranty Registration.

Dealer Name:		Dealer Code:		Dealer Phone:	
Year:		Make:		Model:	
VIN:				Odometer Reading:	
Date Vehicle Acquired:				Certification Date:	

All Items "Needing Repairs (NR)" Must Show "Repairs Completed (RC)" To Qualify For A Certified Limited Warranty

MOTOR HOME	OK	NR	RC
1. Exhaust smoke			
2. Cold Engine start-up/idle/stall			
3. Engine oil and level			
4. Transmission fluid level			
5. Transmission shifting performance			
6. Transmission fluid condition			
7. Cooling system			
8. Oil leaks			
9. Engine noise			
10. Oil Temperature			
11. All warning lights on instrument panel			
12. Road Test			
OPTIONAL SAFETY CHECKS	OK	NR	RC
13. Brake Fluid			
14. Exhaust system			
15. Steering system			
16. Brake, turn signal, and running lights			
17. Seals & Gaskets to avoid potential claims that will not be honored, since lack of fluids are not covered			
18. Parking brake			
TRAVEL TRAILER, FIFTH WHEEL & POP-UP	OK	NR	RC
19. Hose inspection			
20. Leak test			
21. Toilet operation			
22. Step operation			
23. Entertainment components			
24. Air conditioner(s) operation			
25. Furnace and thermostats			
27. Refrigerator 110V operation			
28. Furnace, ducting, vents and thermostats			
29. Range, oven, burners, pilots and controls			
31. Water heater 110V operation (if equipped)			
OTHER	OK	NR	RC
32. Odometer operation			
33. AC/Heater operation			
34. Check manually operated switches			

We certify that all components covered by the RV Certified Limited Warranty are in proper working order and this Inspection is accurate. All needed repairs have been performed.

Certifying Technician: _____ Date: ____/____/____

Service Manager: _____ Date: ____/____/____