



CONSUMER WARRANTY PROCESS

Warranty claim form for **U.S. Customers ONLY**. All other countries please contact your local SHIMANO or LAZER sales office for warranty info.

LAZER warrants to the original retail purchaser that the LAZER product for which they received this warranty, is free from defects in material and workmanship for a period of one year from the date of purchase.

The quickest process is to work directly with your local SHIMANO dealer. SHIMANO dealers have access to an expedited warranty evaluation process which could provide you with a replacement significantly quicker than submitting your helmet directly to SHIMANO.

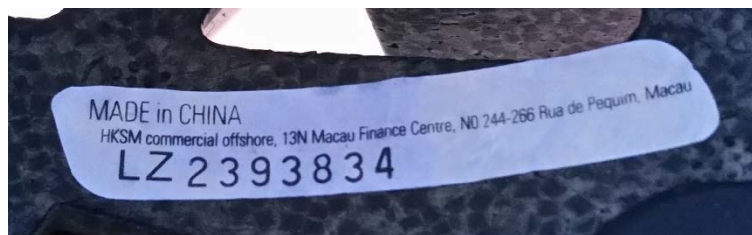
Instructions (via SHIMANO dealer)

1. Visit the SHIMANO Dealer locator at <http://map.shimano.com/dealers/map/na-cycle>.
2. Visit dealer and present helmet and a copy of the original dated purchase receipt.
3. Have the dealer call 1-800-423-2420 to begin the expedited warranty process.

Instructions (via SHIMANO direct)

1. Complete form and include with helmet.
2. Include a **COPY** of the original dated purchase receipt.
3. Remove and save helmet pads and any accessories.
4. Ship the warranty item via an **INSURED, TRACEABLE** carrier to:
SHIMANO North America Bike
Attn: Lazer Warranty
1 Holland Drive
Irvine, CA 92618

COVID-19 UPDATE
We can no longer accept items at any SHIMANO office. All items must be shipped to us.



LZ# Location



Manufacturing Date Location



CONSUMER WARRANTY CLAIM FORM

COMPLETE THIS FORM AND INCLUDE WITH HELMET

Customer Information:

Name: _____

Address (NO P.O. BOX addresses allowed): _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ - _____ Email address: _____

Product Information:

LZ#: _____ Manufacturing Date: _____

Reason for warranty evaluation: _____

Warranty replacements or returns will be shipped to the above address. The warranty processing time is approximately 3-5 business days upon receipt. Please allow 15 business days from the date you returned the product to receive a replacement.

X _____

(Customer Signature)

(Date)