



# Warranty Registration and Pre-Delivery Inspection

**- Hydraulic Breakers, Compactors, Trommel Buckets -**

Return the Completed Form to Activate the OKADA AMERICA Warranty  
Okada America Attn: Warranty Administrator PH:330-239-2666 904  
Medina Road [service@okadaamerica.com](mailto:service@okadaamerica.com) Fax: 330-239-3670  
Medina, OH 44256



### OKADA Model

Name \_\_\_\_\_ Serial No. \_\_\_\_\_ Delivery Date \_\_\_\_\_

### Dealer

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_

### Customer

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_

### Carrier

Make \_\_\_\_\_ Model \_\_\_\_\_ Serial No. \_\_\_\_\_  
Year \_\_\_\_\_ Hours \_\_\_\_\_ hrs

### Auxiliary Circuit Inspection

Circuit Design \_\_\_\_\_ Single or 2-Way \_\_\_\_\_  
Line Size Diameter [Inch] IN= \_\_\_\_\_ OUT= \_\_\_\_\_  
Relief Valve in Auxiliary Circuit \_\_\_\_\_ required

### Flow Meter Test

Flush hoses before testing and connecting to Okada attachment

Oil @ Normal Operating Temperature (Maximum Oil Temperature 180°F)

Pressure [PSI]	Oil flow [GPM]	
1800	_____	*Record Machine's Work Mode @ Test. (If Equipped) _____
2000	_____	Measure Operating Pressure _____ [PSI]
2200	_____	Measure Back Pressure _____ [PSI]
2400	_____	N2 Gas Charge Pressure Back Cap _____ [PSI]
2600	_____	
2800	_____	Notes: _____
3000	_____	
3200	_____	
3400	_____	

\*\* Record the Pressure And Flow When Relief First Cracks Open

\*\*\* Record the Pressure When the Relief is Fully Open

### Pre-Delivery Inspection

	OK	Notes
1. Oil Level & Quality Good.		_____
2. Hose Connections Tightened.		_____
3. Tool Greased per Instructions.		_____
4. Back Cap Nitrogen Gas Pressure Good.		_____
5. Breaker Operation Normal.		_____
6. Instruct Customer on Proper Operation.		_____
7. Instruct Customer on Maintenance		_____
8. Customer Received Operator's Manual.		_____
9. Warranty Explained to Customer.		_____

### Signature and Date

Signature / Pre-Delivery Inspector & Installation Date

Customer's Signature / Date

Submit this form

