

# Welcome to your CTM Powered Mobility Scooter/Chair

- distributed by Allied Medical Ltd



CTM warrants its Mobility Scooter and Powerchair products to be free from defects in materials and workmanship for a period of time from the date of purchase by you the end user. These are subject to certain limitations and exclusions as defined below and supported locally by Allied Medical.

## Frame

The frame is covered by a 36 month warranty and CTM/Allied Medical will at its discretion repair or replace any warrantable weldment or frame section which fails within the warranty period.

## Motors/Transaxle/Brake & Electronics

These components are covered by a 24 month period to be free from defects in material and workmanship under normal use. CTM/Allied Medical will at its discretion repair or replace any warrantable Motor/Transaxle/Brake or Electronic components which fail within the warranty period.

## Batteries & Battery Charger

The batteries and battery chargers that have been supplied with your CTM Mobility product are covered by a separate warranty offered by the battery and battery charger Manufacturer. This is for a period of twelve (12) months from date of purchase.

## Exclusions

- Normal wear and tear
- Consumable wear items such as tyres, tubes, brake pads, suspension and motor brushes
- Upholstery, seating and armrests
- Surface/cosmetic damage to body panels, shrouds and cowlings due to scratches, stone chips etc.
- Any damage resulting from a natural disaster or Act of God
- Any damage resulting from unauthorised repairs or modifications
- Any damage resulting from negligent operation, storage or maintenance
- Delivery of the scooter to and from your authorised CTM /Allied Medical service contractor
- Labour, service calls, shipping and any costs relating to loss of use
- Products used commercially or in rental fleets
- Fault or damage caused to batteries through improper use, including incorrect charging may not be covered under warranty

We recommend you get your CTM Powered Mobility Scooter/Chair serviced regularly by your local Authorised Dealer every 6-12 months depending on usage.

*Nothing herein contained shall be construed in any way as excluding or limiting your rights under the Consumer Guarantees Act 1993.*



## Warranty Registration

Name	_____
Phone	_____
Street Address	_____
Suburb	_____
Town/City	_____

Signature & Date

Date of Purchase	_____ / _____ / _____
Authorised Dealer	_____
Model	_____
Serial #	_____

Please complete and return to:  
Allied Medical Ltd  
PO Box 302250  
North Harbour  
Auckland 0632

Email to: [customercare@alliedmedical.co.nz](mailto:customercare@alliedmedical.co.nz)



# Warranty Registration

Date of Purchase

/ /

Authorised Dealer:

Model

Serial #

Service Date

/ /

Next Service Due

/ /

Serviced By

Service Notes

Service Date

/ /

Next Service Due

/ /

Serviced By

Service Notes

Service Date

/ /

Next Service Due

/ /

Serviced By

Service Notes



**AFFIX  
YOUR  
STAMP  
HERE**

Allied Medical Ltd  
PO Box 302250  
North Harbour  
Auckland 0632