



**RENEGADE LIGHTS
WARRANTY / RETURN POLICY**

Name: _____

Address: _____

City, State, Zip: _____

Daytime Phone Number: _____

Evening Phone Number: _____

E-mail address: _____

Date your Renegade Lights were installed : _____

Rally you had your Renegade Lights installed: _____

Tell us a about the problem or defect you are experiencing: _____

Have you included the defective light or part? _____

If no, please explain why: _____

Signature: _____

Date: _____

Mail too:

**Renegade Lights
Ralph Wilkins
10904 County Road 2840
Slaton, TX 79364**

**Or Fax too:
806-445-0811**