*** IMPORTANT ***

In case of a recall, we can reach you only if we have your name and address. You MUST send in this card to be on our recall list.

OMB APPROVED OMB NO. 2127-0050

SHADED AREAS MUST BE FILLED IN BY SELLER

Register ONLY Brand Checked Below

☐ **FEDERAL**

☐ **HERO**

CUSTOMER'S NAME (PLEASE PRINT LAST NAME FIRST)

CUSTOMER'S ADDRESS **APT / SUITE**

CITY

STATE **ZIP CODE** —

DATE – –

SELLER COMPLETE (CAN BE RUBBER STAMPED)

SELLER'S NAME

SELLER'S ADDRESS

CITY **ST** **ZIP**

QTY	TIRE IDENTIFICATION NUMBERS								PATTERN NAME
	1	2	3	4	5	6	7	8	

* FEDERAL LAW RESTRICTS CUSTOMER NAME AND ADDRESS INFORMATION TO BE USED FOR TIRE RECALL PURPOSES ONLY!