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## **ECU Repair Request Form**

This form is intended to collect the necessary information to begin the repair process of your Electronic Control Unit (ECU). Please fill it out as completely and accurately as possible. The technical details you provide will help us better assess the issue and determine the appropriate course of action.

CONTACT IN	IFORM	ATION
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First name					
Last name					
Email address					
Phone number					
City					
State/Province					
Country					
TECHNICAL INFOR	MATIO	N			
Make and model of t	he				
Year of manufacture					
OEM reference					

Thank you for providing this information. Please send this PDF to: reman@cojaliusa.com

Description of the fault. Please, specify the DTC code.

A member of our technical team will review your case and contact you as soon as possible to discuss the next steps.