

RMA - Retour Material Authorisation

please fill in one form for each device

RMA Number

Please contact us in advance to receive an RMA number.

(conditionally)

customer no.

company name

contact person

shipping address

telephone / fax

e-mail

date:

Reasons for retour:

- to repair / warranty exchange (supplier / manufacturer decides)*
- credit note (declare reason for retour)*
- other (e.g. wrong delivery, wrong quantity, wrong article, wrong order etc.)*

invoice number

invoice date

article number

quantity

article description

serial number

* Detailed description of errors / reasons for retour

*** Please review our RMA policy ***

I accept the RMA policy and the general terms and conditions / date - signature - company stamp

This section to be completed by **preussen automation**:

() invoice no.:

goods received on: ____ . ____ . 20 ____

() other:

signature: _____