



Request for RMA Please fill out and return within 5 days. Company Name: Customer No. Zip Company Address: State Phone Number: Fax Number RMA Policy Terms and Conditions 1. IHI Electronics warrants its products to be free from electronic defects or faulty workmanship for thirty (30) days from the invoice date or within the warranty date issued on the invoice. Any claims for shipment errors must be made within two (2) days of delivery.
 All claims must be issued an RMA# within thirty (30) days from the invoice date or within the warranty date issued on the invoice. \_\_\_\_\_Initials
 IHI Electronics must receive the product within ten (10) days of RMA# issuance date. Any product received after ten (10) days may be refused. \_\_\_\_\_Initials
 IHI Electronics will not accept C.O.D. returns unless authorized. \_\_\_\_\_Initials
 Any product returned without an RMA# will be refused. \_\_\_\_\_Initials
 Any product returned with an RMA# for other goods will be returned. \_\_\_\_\_\_Initials 8. A copy of this form must accompany all returns. \_\_\_\_\_Initials 9. I have properly packaged all items as if they were new. I am aware and fully understand that if the product arrives damaged or not in proper ESD packaging IHI Electronics reserves the right to refuse or void the warranty upon arrival. \_\_\_\_Initials 10. I have properly tested all products to ensure that they are truly defective. \_\_\_\_Initials 11. I am aware and fully understand that if any product that I ship back as defective, and is found to be in working condition, I will be charged a \$65.00 an hour service fee. And all the items will be returned. \_\_\_\_Initials 12. I Fully understand these Terms and Conditions. Initials Requested Products for Return Invoice # Qty Description Reason for Request Date Code Comments: Requested action: Replacement of parts(If possible.) Credit to Account Return of Monies Customer Authorized Name (Print) : \_\_\_\_\_ 

FOR IHI ELECTRONICS' PURPOSES ONLY

RMA Approved RMA Declined

Authorized Signature:

<sup>\*</sup> This form in no way approves any R.M.A. in any way and constitutes only a request for action by IHI Electronics.



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In order to expedite the processing of your RMA number, please fill out this form completely and fax to 949.855.5690 or Email to rma@ihielectronics.com Once your RMA request is processed, we will return your form with a Return Merchandise Authorization number via e-mail if approved.

**Customer Information** 

Company:			Telephone:		
Address:			<del>.</del>	Fax:	
Contact:			E-mail:		
Product and R	Return Information				
QTY	PART NUMBER	INVOICE NUMBER	INVOICE DATE	UNIT PRICE	PROBLEM/REASON FOR RETURN
То	tal Madulas Paturning				
	tal Modules Returning  cs will not accept any products ret	urned without a P	MA number		
Please Select		arrieu witiiout d K	Credit		Ī
	Replacement		S. Care		