

RMA Form

When returning products, please note the following:

- Please include the completed RMA form. Material returns without an accompanying RMA form will unfortunately delay processing.
- Please ensure secure packaging.
- Please ensure compliance with any ESD requirements (handling and packaging).
- We do not assume any liability for transport damages in case of insufficient packaging of the returned products.

Customer and contact:

The data provided here will be treated as the responsible contact for the RMA.
This contact will receive all relevant information regarding the RMA.

* = Mandatory

Company*:

Street*:

ZIP und City*:

Contact person*:

Phone*:

Email*:

Customer no. Autronic:

Your RMA no.:

Company*		
Street*		
ZIP und City*		
Contact person*		
Phone*		
Email*		
Customer no. Autronic:		
Your RMA no.:		

Address invoicing:

See above

Delivery address

See above

Alternative:

Alternative:

Company*:

Street*:

ZIP und City*:

Company*	
Street*	
ZIP und City*	

Additional comments:

RMA Form

Description

Sample label:



Verify the product label for information required below.

Type No.:		<input type="text"/>	Type:	<input type="text"/>	Will be filled in by Autronic	
Serial no.:		<input type="text"/>	Sent with delivery note:	<input type="text"/>	Warranty	<input type="checkbox"/>
Behavior in the event of an error:		<input type="text"/>	Application	<input type="text"/>	Repair	<input type="checkbox"/>
Description		<input type="text"/>			chargeable	<input type="checkbox"/>
Load condition at which the failure occurs?					<input type="text"/>	
Since when in use?		<input type="text"/>	Complaint/repair:	<input type="text"/>		
					replacement	<input type="checkbox"/>
					No fault	<input type="checkbox"/>

Type No.:		<input type="text"/>	Type:	<input type="text"/>	Warranty		<input type="checkbox"/>
Serial no.:		<input type="text"/>	Sent with delivery note:	<input type="text"/>	Repair	<input type="checkbox"/>	
Behavior in the event of an error:		<input type="text"/>	Application	<input type="text"/>	chargeable	<input type="checkbox"/>	
Description		<input type="text"/>			repairs	<input type="checkbox"/>	
Load condition at which the failure occurs?					<input type="text"/>		
Since when in use?		<input type="text"/>	Complaint/repair:	<input type="text"/>			
					No fault	<input type="checkbox"/>	