



GE Sensing

O- 1100 Technology Park Drive. Billerica, MA 01821 US - Phone: 978-437-1000- Fax: 502-479-6722 - Website: gesensing.com

Return Material Authorization (RMA) Request Form

All information must be completed and a Purchase Order received before a RMA will be issued.

Company Name: _____ Date: _____

Contact Name: _____ Phone Number: _____

Email Address: _____ Fax Number: _____

Please select the preferred method of communication: Phone Email: Fax:

Minimum Evaluation / Calibration Estimate*: _____

(*Units requiring repairs will be priced accordingly and quoted aft evaluation, in the event a customer decides not to proceed with repairs or replacements the minimum evaluation cost will be applied to your PO or creditcard)

| Your Bill To Address: | Your Ship To Address: |
|-----------------------|-----------------------|
| | |
| | |

UNITS TO BE RETURNED: Has the returned product been exposed to hazardous or contaminated substances **Yes** **No**
If **YES** the product must be decontaminated prior to return

| Model Number | Serial Number | Model Number | Serial Number | Model Number | Serial Number |
|--------------|---------------|--------------|---------------|--------------|---------------|
| | | | | | |
| | | | | | |
| | | | | | |

Reason for return: Repair*: Calibration: NIST Calibration: Other*

*Comments/ Repair Details: _____

- Please provide a detailed description of repair issues. If details are not provided, a standard system check will be performed and if the equipment meets manufacturer specifications it will be returned "as is" at standard evaluation cost. If you still experience issues, GE Sensing will not be responsible for any additional charges.

Do you require "As Found/ Received" Data*? Yes No *Additional charges may apply

Preferred Shipping Method: _____ Freight Collect Account#: _____

PO Number/ Credit Card # & exp date: _____

- Please attach a copy of Purchase Order – RMA WILL NOT BE ISSUED WITHOUT A HARD COPY OF YOUR PURCHASE ORDER REFLECTING QUOTED CHARGES
- Please return via fax to 502-479-6722 or email to custcareboston@ge.com
- GE will issue a RMA number and label for you to return your equipment to us. **Label must appear** on the outside of the shipping carton and the number on any paperwork submitted to GE

The information below will be completed by GE and returned via fax or email to Customer.

RMA # _____ Date Issued: _____

Estimated Turnaround time from receipt of product: _____ Price of Service: _____

Thank you for your order. GE Sensing