

**Return Material Authorization Request Form**

**CUSTOMER INFORMATION:**

Customer Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person (Full name): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Return Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **RMA Number:** |  |

Ship From:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reason For Return:**

**⬜** Under Warranty Repair **⬜** Customer Issued Damage **⬜** Out Of Warranty Repair

**⬜** Others

**PRODUCT INFORMATION:**

|  |  |  |  |
| --- | --- | --- | --- |
| **NO** | **SN** | **Model** | **Fault Description** |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |

**⬜** I understand that the RMA is requested as per Micas warranty terms & conditions which I have read and understand; I promise the returned product don’t have personal private data.

Signature ：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please do not return the defective product without RMA#.*