

RMA REQUEST FORM

Please complete and submit this form PRIOR to sending your item to APTEch.
We will contact you with an RMA number after receipt and approval of this COMPLETED form.

APTECH DOES NOT ACCEPT SHIPMENTS WITHOUT AN RMA AND WILL RETURN ITEMS AT CUSTOMER'S COST.

Product Name: _____ Model No./Serial No.: _____

Description: _____

Company: _____ Date of Request: _____

Address: _____

Phone: _____ Email: _____

HAZARDOUS MATERIAL NOTIFICATION

HAZMAT SECTION MUST BE COMPLETED IN ORDER TO RECEIVE AN RMA NUMBER FROM APTECH.

Known Materials in contact with this equipment are: (please mark all that apply)

___ Potentially Hazardous

___ Non-Hazardous

___ Unknown if Hazardous

___ Corrosive

___ Toxic

___ Explosive

___ Biologically Hazardous

List types of gases, chemicals, biological materials, or other materials exposed to the product during its use:

Contact information for questions regarding last use of this equipment:

Name: _____ Phone: _____

Email: _____

This form completed by: _____ Date: _____

Is this a warranty request? Yes No

Please email this completed form to APTRMA@a-p-tech.com.

DO NOT SEND THE ITEM TO APTECH UNTIL YOU HAVE RECEIVED AN RMA NUMBER.

For APTEch use only: RMA #: _____ Date: _____ Approved by: _____