



**RETURN MATERIAL AUTHORIZATION FORM**

EMAIL : saba@microtransdubai.com ; zeeshan@microtransdubai.com

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ State: \_\_\_\_\_

Country: \_\_\_\_\_

**RMA #**

MICROTRANS LLC will issue RMA # only if proper conditions are met

CREDIT NOTE #:	CREDIT NOTE AMT	CR NOTE ISSUED ON

Phone Number: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax Number: \_\_\_\_\_

For out-of-warranty boards, physical damage there is a Non-Warranty repair analysis fee: \$2 per unit. Fee would be credited toward any repair or replacement costs. NTF units will be returned upon payment of fee.

Business Contact (e.g. Buyer, Distributor): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax Number: \_\_\_\_\_

PLEASE TICK MARK THE BELOW CHECK BOXES

SCRATCH ON UNIT YES/NO	BATTERY SUBMITTED YES/NO	CHARGER SUBMITTED YES/NO
ADAPTOR SUBMITTED YES / NO	PHYSICAL DAMAGE YES/NO	OTHERS

**RMA TIME: 09.00 AM TO 12.00 PM (SUNDAY TO THURSDAY ONLY)**

S NO	Serial no	Model No	Purchase Date	Purchase invoice number	Problem Description. This needs to be detailed enough for our technician to replicate the issue in our lab.
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*(THIS SESSION IS FOR MICROTRANSLLC USE ONLY)*

JOB CARD OPEN	ISSUED SERIAL NO:	ISSUED BY:	<b>AUTHORIZED BY:</b>
JOB CARD CLOSED			
<b>RMA #</b>	ISSUED MODEL NO		
	DATE OF ISSUE:		

**MICROTRANS LLC**