



RMA Request

Acct: _____

Date: _____

Company Name: _____

Phone#: _____

Contact Name: _____

Please provide the requested information below and fax back to 630-682-8850.

Item	Qty	PO#	PO Date	Replace or Credit	Reason for Return

Please note the following for all RMA requests.

- Once the RMA request has been approved, an RMA number will be faxed to you. If a return is required for defective or mis-shipped product, an ARS return shipping label will be faxed as well.
- If you have requested a replacement, the replacement will be shipped and invoiced to your account. A credit memo will then also be issued to your account. It will be your responsibility to apply the credit memo to the replacement invoice.
- If credit is requested, a credit memo will be issued to your account and no replacement will be issued.
- Returns for non-defective product will incur a 20% restocking charge.
- The customer is responsible for the shipping charges of non-defective product.
- An RMA is not an authorization for credit.
- Please do not return any product to Vaxcel without an approved RMA number.
- Vaxcel is not responsible for labor charges or installation/re-installation of returned or replaced product.

Please contact our Customer Service Department at 800-4VAXCEL should you have any questions. Thank you for your cooperation.