Return Merchandise Authorization Form

891 S. Azusa Avenue, City of Industry, CA 91748
Tel: (626) 839-5955 · Fax: (626) 839-5966 · Email: rma@powmax.com

Company: _____
Attention: _____
Address: _____
State and Zip: _____
Phone: _____
Fax: _____
Email: _____
Request Date: _____

RMA Number:

RMA # is valid for 10 days only

TOTAL UNITS AUTHORIZED FOR THIS RMA_____

Date Issued:

QTY	INVOICE NUMBER (Required)	MODEL NUMBER	REASON FOR RETURN

Limited Warranty and RMA Policy

Powmax offers one year warranty for all **POWMAX** products from the date of purchase. Warranty does not cover any damages due to accidents, misuse, or negligence. Our RMA department reserves the right to refuse service to any customers who do no comply with the following RMA procedures:

1. RMA request **will not be processed** with incomplete information or illegible prints.
2. In order to obtain an RMA number, customer must provide a valid invoice number.
3. Physically damaged items must be reported within 5 days of items received for investigation
4. Authorized returns are to be shipped prepaid and insured. No collect shipments will be accepted.
5. RMA number must be placed on the outside of the return package. Any package sent in without a RMA number may be returned to the sender non-repaired/non-replaced.
6. This RMA form is intended for our customers use only. End-user purchaser must contact the original place of purchase for warranty services.