



Submit To: Fax (780) 944-1406 or Email RMA@calscan.net

Return Material Authorization (RMA) Form

Company Information			
Company Name:		Date: (YY/MM/DD)	
Contact Name:		Address:	
City:			
		Telephone:	
Fax:		Email Address:	

Ship To: (If different from company info)		Bill To: (If different from Ship to address)	
Company Name:		Company Name:	
Contact Name:		Contact Name:	
Address:		Address:	
City:		City:	
Telephone:		Telephone:	
Fax:		Fax:	
Email Address:		Email Address:	

Tool Information	
Equipment Model #:	Equipment Serial #:
Problem Description	
RTD:	<input type="checkbox"/> Supplied <input type="checkbox"/> Not shipped <input type="checkbox"/> Missing, supply new one
Data:	<input type="checkbox"/> Emailed <input type="checkbox"/> On Tool <input type="checkbox"/> On Media <input type="checkbox"/> Need to recover
Battery:	<input type="checkbox"/> Replace <input type="checkbox"/> Replace if over 18 months <input type="checkbox"/> Do not replace

Shipping & Payment Information	
Shipping Method:	Account Number:
Payment Method :	<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> PO# _____

For Calscan Use Only	
Date: (YY/MM/DD)	RMA #:

Please note the following:

1. Send in the completed request form. Please fill in ALL the information required in the form.
 If the RMA form is INCOMPLETE, the product will be refused and returned at the customer's expense.
2. All products must be properly packaged. Calscan is not responsible for product that has been physically damaged prior to or during shipping.
3. Batteries in Hawks & DCR's are dangerous goods; please ship accordingly. If shipped by bus, remove and retain battery.