# **Return Merchandise Authorization** (RMA)



#### Instructions:

- 1. Complete the following form.
- 2. If Shipping Address is not the SAME as Billing Address, then please complete that section.
- 3. Click the "Submit by Email" button to email this information to NRT. You cannot SAVE this form, so click the "Print Form" button if you wish to retain a copy.

# Important!

- 1. The product cannot be returned without an RMA number.
- 2. Upon submission of this form, a NRT representative will review your request. If approved, we will contact you by e-mail (within 2 business days) to provide an assigned RMA number and shipping information.
- 3. The customer is responsible for freight charges. Any replacement parts when authorized will be shipped only when the defective part has been received by NRT.

Billing Address	:
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\* Fields marked with an asterisk are required.

- \* Company Name:
- \* Address:
- \* City:
- \* State:
- \* ZIP Code:

Shipping Address:	Same as billing address?	Yes	No
Company Name:			
Address:			
City:			
State:			
ZIP Code:			

## **Return Information:**

- \* Contact Name:
- \* Phone:

Fax:

\* Email:

## **Item for Return:**

- \* NRT Serial Number:
- \* Part Number:
- \* Part Description:

Part Serial Number:

<u>Note:</u> If reason "other" provide additional information below.

Additional

Information: