

# DANAHER CONTROLS / HECON<sup>®</sup>

RMA Request Form • Fax Number (910) 879-5486

Date \_\_\_\_\_

Contact Name \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Bill to: \_\_\_\_\_

\_\_\_\_\_

Ship to: \_\_\_\_\_

\_\_\_\_\_

**\*\*\* Credit card payment is required for all non-warranty repairs. \*\*\***

Credit Card: VISA \_\_\_\_\_ AMEX \_\_\_\_\_ MASTERCARD \_\_\_\_\_

Name \_\_\_\_\_ EXP \_\_\_\_\_

Card Number \_\_\_\_\_

Quantity \_\_\_\_\_ Part Number \_\_\_\_\_

Description \_\_\_\_\_

Serial Number(s)/Date Code(s) \_\_\_\_\_

Reason for Return: Doesn't Count \_\_\_\_\_ Doesn't Reset \_\_\_\_\_ Cracked Case \_\_\_\_\_

Broken Pins \_\_\_\_\_ Other (please specify) \_\_\_\_\_

Quantity \_\_\_\_\_ Part Number \_\_\_\_\_

Description \_\_\_\_\_

Serial Number(s)/Date Code(s) \_\_\_\_\_

Reason for Return: Doesn't Count \_\_\_\_\_ Doesn't Reset \_\_\_\_\_ Cracked Case \_\_\_\_\_

Broken Pins \_\_\_\_\_ Other (please specify) \_\_\_\_\_

Please complete this form and fax it to (910) 879-5486. For "Out of Warranty Returns", credit card information **MUST** be filled in for the RMA number to be issued. Should you have a question concerning this form, please contact us at (800) 286-4890 and select option 8. An RMA number will be faxed back to you within 24 hours. Our shipping address will be on the fax. Please mark the RMA number on the outside of the box and put a copy of the RMA inside the box for faster service. Be certain to ship via a traceable means (e.g., UPS, Certified Mail, etc.) HECON<sup>®</sup> is not responsible for repairs that never reach our repair facility or are lost en route. To check status on your repair, call 800-286-4890, select option 4 and reference your RMA number. Thank you for your business.

HECON<sup>®</sup> Customer Service