|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Issued By: |  | Date Issued: |  | Date Goods Received: |  |

|  |
| --- |
| **CUSTOMER INFORMATION** |
| **Customer Name:** |  | **Contact:** |  |
| **Address:** |  |
| **City:** |  | **Phone:** |  |
| **Province:** |  | **Fax:** |  |
| **Postal/Zip Code:** |  | **E-mail:** |  |

\* An Assessment Fee of $100.00 will be applied to all returns on items that are **not repaired, replaced or those deemed as ‘no fault found’.**

\*\* Has equipment been exposed to or used in a hazardous material application? \*\*IF YES, please fill out the HazMat Decontamination Statement provided and return by email to the originator of this RA. **Telematic Controls reserves the right to refuse any shipment that is received without the appropriate documentation.**

\*\*\* Please remove all Custom Attachments prior to shipping the item. An additional Labor Charge of $50.00 per item will be applied to all returned items that include **CUSTOM ATTACHMENTS**.

|  |
| --- |
| **DEVICE INFORMATION** |
| **Model #:** |  |  |  |
| **Telematic Serial #:** |  |  |  |
| **Manufacturer Serial #:** |  |  |  |

|  |
| --- |
| **REASON FOR RETURN / FAILURE** |

|  |
| --- |
| **ASSESSMENT/REPAIR INFORMATION / ESTIMATE** |
| **Item** | **Quantity** | **Description** | **Unit Price** | **Extended Price** |
|  |  |  |  |  |
|  | **Total:** |  |

|  |  |
| --- | --- |
| CUSTOMER AUTHORIZATION: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Purchase Order #: |  | Telematic Repair Order #: |  |

**Hazardous Materials (HazMat) Decontamination Cleaning Statement**

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  | Device Model: |  |  |
|  |  |  |  |
|  | Serial Number: |  |  |
|  |  |  |  |
|  | Application Type: |  | Telematic S/N: |  |  |
|  |  |  |
|  | **Please list each substance to which the equipment was exposed.** |  |
|  |  |  |
|  | Common Name |  | RA# if available |  | Used for hazardous waste |  | CEPA waste code if used for hazardous waste |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | [ ]  Yes | [ ]  No |  |  |  |
|  |  |  |  |  | [ ]  Yes | [ ]  No |  |  |  |
|  |  |  |  |  | [ ]  Yes | [ ]  No |  |  |  |
|  |  |  |  |  | [ ]  Yes | [ ]  No |  |  |  |
|  |  |  |
|  | **Please circle any hazards and/or process fluid types that apply:** |  |
|  |  |  |
|  | Infectious | Radioactive | Explosive | Pyrophoric | Poison Gas |  |  |
|  | Cyanides | Sulfides | Corrosive | Oxidizer | Flammable | Poison |  |
|  | Carcinogen | Peroxide Reactive - Air |  | Reactive Water | Reactive Other |  |  |
|  |  |  |
|  | Describe decontamination / cleaning process. Include MSDS description for substances used in decontamination and cleaning processes. Attach additional documents if necessary. |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  | **Failure to comply with this procedure will result in the shipment being refused.** |  |
|  |  |  |
|  | **EQUIPMENT HAS BEEN CLEANED AND DECONTAMINATED OF ANY HAZARDOUS SUBSTANCES AND MEETS DOT AND EPA REGULATIONS.** |  |
|  |  |  |
|  | By: |  |  |  |  |  |  |
|  |  | (Signature) (Print Name) |  | (Title) |  | (Date Mmm-dd-yyyy) |  |
|  |  |  |
|  | Company: |  |  |  |  |  |  |
|  |  | (Please Print) |  | (Phone) |  | (Fax) |  |
|  | **If you are returning more than one piece of equipment, please make copies of this form and complete for each item.** |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  | **Hazardous Materials (HazMat) Decontamination Cleaning Statement** |  |
| **MATERIAL SAFETY DATA SHEETS (MSDS)** |
|  |
| A **Material Safety Data Sheet (MSDS)** must be provided with the returned equipment, for each substance that has come in contact with the equipment being returned, including substances used for decontamination and cleaning. |
|  |
|  |
| **PACKAGING / SHIPPING** |
|  |
| **Shipping Pressure Equipment Only** |
|  |
| To meet DOT requirements for identifying hazardous substances, ship only one pressure equipment per package |
|  |
|  |
|  |
| * Each package must be clearly marked with an RMA number.
 |
| * A decontamination / Cleaning Statement must be included inside the package.
 |
| * A duplicate Decontamination / Cleaning Statement must be visibly attached to the outside of the package.
 |
| * An MSDS for each substance that has come in contact with the equipment must be included inside the package.
 |
| * A duplicate MSDS must be visibly attached to the outside of the package.
 |
|  |
|  |
|  |
|  |
|  |
| Ship all equipment to the above address |
|  |
| Attn: RA# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *RA number MUST BE written on the outside of the box* |
|  |