



## Return Material Authorization (RMA) Request Form

F-IS-01 (A) - RMA Request Form

SSD and EGT Division  
9225 Forsyth Park Dr  
Charlotte, NC 28273

Office: 704-588-3246

Fax: 704-588-4806

Date: \_\_\_\_\_

### Customer Contact Information:

Company:	_____	Contact:	_____
Address 1:	_____	Phone:	_____
Address 2:	_____	Fax:	_____
City:	_____	State:	_____
Zip:	_____	Country:	_____
		Email:	_____

### Reason for Return:

#### Warranty Claim (Warranty is decided by factory upon return of equipment)

Case ID: \_\_\_\_\_ Required for Warranty RMA - Contact Tech Support at 704-602-6062

#### Motor Nameplate Data (for motoring drives)

Voltage: \_\_\_\_\_ HP: \_\_\_\_\_  
RPM: \_\_\_\_\_ Amps: \_\_\_\_\_  
Hz: \_\_\_\_\_

#### Failure Description (please provide as much detail as possible):

Item#	Part Number	Serial Number	Original Sales Order #
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____

#### Non-Warranty Return request (Check which one applies)

Non-Warranty Repair: \_\_\_\_\_ Expedited service needed - additional charges will apply:  
Return for Credit (Restock)- Request: \_\_\_\_\_ See "RMA Policies" for details on rules and fees  
Product Shipped was Incorrect: \_\_\_\_\_  
Customer Furnished Equipment: \_\_\_\_\_  
Other (please explain below): \_\_\_\_\_

Item#	Part Number	Serial Number	Original Sales Order #
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____

### Return Instructions:

1. RMA number will be issued after RMA request form is completed and e-mailed to [cmmaradiaga@parker.com](mailto:cmmaradiaga@parker.com) or faxed (704-588-4806)
2. Material should be properly packaged (preferably in original box) and sent to above indicated Parker Address
3. RMA number should be clearly marked on the outside of the box
4. For Non-warranty repair, a PO for half price of new equivalent part is required. For any other return, a \$0 PO is required for tracking purposes