



48293 Fremont Blvd.

Fremont, CA 94538

Phone: (510) 668-4988 ext.450

Open Monday through Friday, Hours of Operation 10:00am to 4:00pm

# RMA REQUEST FORM

**PLEASE FAX OR EMAIL THE COMPLETED FORM TO [RMA@IPEXINFO.COM](mailto:RMA@IPEXINFO.COM) OR (510) 668-8440**

Customer number \_\_\_\_\_ Date Received \_\_\_\_\_ Date issued \_\_\_\_\_ RMA # \_\_\_\_\_

COMPANY

NAME \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact person \_\_\_\_\_ Shipped Via \_\_\_\_\_ Telephone \_\_\_\_\_ Fax Number \_\_\_\_\_

Email address: \_\_\_\_\_

SKU#	INVOICE #	DATE	SERIAL NUMBER	QTY.	PROBLEM

### IMPORTANT RMA RETURN PROCEDURES

1. MUST COMPLETE THE RMA FORM WITH ALL DETAIL OF RETURN INFORMATION AS LIST BELOW.
2. RMA NUMBER IS VALID FOR 14 DAYS FROM THE DATE OF ISSUE.
3. RMA NUMBER MUST BE MARKED ON THE OUTSIDE OF THE RMA RETURN PACKAGE OR WILL BE REJECTED.
4. DO NOT SEND ACCESSORIES \*\*\*\*\*EXCEPT FOR DOA OR CREDIT\*\*\*\*\*
5. IF THERE IS NO RESPONSE AFTER 24(EXCEPT WEEKEND/HOLIDAY) SUBMIT THIS REQUEST, PLEASE CONTACT OUR RMA DEPT.
6. PLEASE CHECK ONLINE FOR LIMIED WARRANTY & RMA SERVICE POLICY