



PRODUCT RETURN REQUEST FORM

INSTRUCTIONS: Please complete all fields in the area outlined and E-mail / Mail / Fax to :

Techtop Industries, Inc.
Attn: RMA
2815 Colonnades Court
Peachtree Corners, GA 30071

Email: info@techttopind.com

Fax: 1-866-204-1498

Requesting: CREDIT:

Invoice Number: _____

CUSTOMER (DISTRIBUTOR / SHOP)

Name: _____

Address: _____

City, State, Zip: _____

Email Address for RMA Confirmation: _____

Shipment Address (If different than address above)

Name: _____

Address: _____

City, State, Zip: _____

Model Number of motor(s) being returned:

_____ Qty: _____

Model Number of requested replacement(s):

_____ Qty: _____

Reason for Return:

BELOW FOR TECHTOP USE ONLY

RMA Number: _____ Date: _____

Freight for return is responsibility of: Customer: _____ Techtop: _____

Freight for replacement is responsibility of: Customer: _____ Techtop: _____

Restocking fee of _____ % applies:

Approved for credit only: Sign _____

Approved Replacement: Sign _____

Motors returned to TECHTOP must be in saleable condition in original TECHTOP packaging to be accepted. If repackaging is necessary, a fee will be charged by TECHTOP to repackage the product. If the product is damaged, or is not in saleable condition, the credit may be refused at TECHTOP's discretion and the product will be made available for pick up by the returning party.

Unless otherwise instructed, product should be returned to the TECHTOP Atlanta warehouse at:

Techtop Industries, Inc.
2815 Colonnades Court
Peachtree Corners, GA 30071

Upon approval of this return you will receive an E-mail with the instructions for return of the product. Please be sure to include a copy of the issued RMA with the return shipment. Credit will be applied to your account upon receipt of the above. If a replacement is approved and invoice for your replacement will be issued upon shipment and a credit will be issued upon receipt of the above.