

Return Goods Authorization (RGA) Form

Date _____

RGA No. (No credit will be offered without an authorized RGA Number.) _____

Reject Type: Line Field Customer Requested Rework

Customer Information
Company:
Address:
City:
State or Province:
Postal Code:
Contact Name:
Contact Phone:
Contact E-mail:

Please note original warranty information and original shipping date prior to submitting RGA form.

HYCO Part Number	HYCO Serial Number	Quantity	Reason for Return / Remarks

Authorized By _____

Date _____