

**RETURN AUTHORIZATION FORM**

**{{rma}}**

|  |  |  |  |
| --- | --- | --- | --- |
| **Basic Information** | | | |
| **Company Name** | **Contact Email** | **CSD Number** | **Date** |
| **{{cp}}** | **{{mail}}** | **{{csd}}** | **{{date}}** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Returning Product Information** | | | | |
| **No.** | **Product name** | **Serial number** | **FW & HW version** | **Description of the defects** |
| **1.** | **iSMA-B-{{device}}** | **{{sn}}** | **{{fw}}** | **{{problem}}** |

|  |
| --- |
| **Shipping Information** |
| 1. Please include completed RMA form and all required documentation with your returning shipment 2. Please ship the products to following address:   Technical Support Departament  iSMA CONTROLLI Poland S.A  Budowlanych 27  80-298  Gdansk, Poland   1. If you are non UE client, you must type importer address as below:   iSMA CONTROLLI Poland S.A  1 Sierpnia Street 6  02-134  Warsaw, Poland   1. Make sure products are returned in the condition they were received. |

**Sender: Recipient:**

**Proforma Invoice number {{rma}}**

**For customs purposes only – return of the faulty devices**

|  |  |
| --- | --- |
| **FROM** | Company name:: |
| **Contact person: {{cpp}}** |
| **E-mail: {{mail}}** |
| Address : |
| Zip Code |
| City |
| Country |

**iSMA CONTROLLI Poland S.A.**

**ul. 1 Sierpnia 6**

**02-134 Warszawa**

**tel. +48 22 290 00 13**

**Delivery address:**

**iSMA CONTROLLI Poland S.A**

**ul. Budowlanych 27**

**80-298 Gdańsk, Poland**

**Contact person: …………….**

**DAP: Gdansk, Poland**

**Articles listed are not being sold (complaint process). Amounts shown are for Customs purposes only.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **NO** | **DESCRIPTION** | **Quantity** | **Unit price** | **Total**  **value** | **Currency**  **(EUR/USD/**  **GBP)** | **TAX** | **Country**  **of origin** |
| 1 | {{description}} | {{quantity}} | 2 | {{total}} | EUR | 0% | PL |
|  |  |  |  |  |  | 0% | PL |
|  |  |  |  |  |  | 0% | PL |
|  |  |  |  |  |  | 0% | PL |
|  |  |  |  |  |  | 0% | PL |
|  |  |  |  |  |  | 0% | PL |

**TOTAL VALUE of the proforma inv. …………………(EUR/USD/GBP)**

……………………………………. ..………………………………………..

Signature of Sender Date and place of issue