

Return Material Authorisation (RMA)



***Customers are not authorised to return parts without an RMA number issued by and with written authorisation from Variohm EuroSensor. Unauthorised returns will be rejected.**

Send All Returns to:

Variohm Eurosensor Limited, Williams Barns, Tiffield Road, Towcester, Northamptonshire, NN12 6HP, UK.

Your RMA will only be processed if it meets the following criteria:

1. The authorised RMA number will be returned to you by email with an authorised signature allowing you to return products. Please mark RMA number on the outside of the box when returning goods.
2. Parts must be within warranty period, unless you require the products to be repaired.
3. Parts that fall within Variohm EuroSensors operating specifications or are deemed defective due to customer misapplication will be returned to sender as received and may be subject to an evaluation fee based on the costs caused. You may also be liable for shipping costs.
4. Parts must be returned in reasonable / clean condition in adequate packaging and shipping material, which must adhere to all applicable safety precautions, if applicable. Failure to do so will result in product returned to sender.
5. The customer is responsible for complying with all import and export requirements for returning parts to Variohm EuroSensor for repair / service.
6. If you need immediate replacement, you will need to provide Variohm Eurosensor with a new purchase order (PO).

Procedure

1. Fill in all required data below. One form is required for each part number being returned.
2. Submit the completed form as an attachment by email to your Variohm EuroSensor Customer Support Contact which is Helene.Skinner@variohm.com
3. RMA numbers will be provided by return email.
4. Any information including data, pictures, detail failure info, etc. will expedite the processing of your RMA.

CUSTOMER DECLARATION FOR RETURNED PARTS

I declare to the best of my knowledge and belief that the information provided on this form is accurate and the units can be returned to Variohm EuroSensor Ltd

Print Name _____ Signature: _____

Title: _____ Date: _____

Return Material Authorisation (RMA)



*RMA No:

Authorisation Request – Part A

Customer Information & Original Shipment Information:

Company Name:			
Contact Name:		Contact Email:	
Contact Phone:		Customer Address:	
Part Number:		Serial Number:	
Original Purchase Order Number:		Sales Order Number:	
Variohm Invoice Number:		Customer Reference Number:	
Quantity to be Returned:			
Medical Device Reportable (MDR) Incident: i.e. Could the failure have caused injury or death to a patient			Yes <input type="checkbox"/> No <input type="checkbox"/>

Customer Return Description:

Product Application:			
Return Reason:			
Detail Failure Info:			
Product Disposition Expectation:	Charge Repair <input type="checkbox"/>	Credit <input type="checkbox"/>	Rework / Replace <input type="checkbox"/>

Sensor Type:

 Humidity

 Piezo

 Pressure

 Position

 Vibration

 Force

 Temperature

 Optical

 Fluid

(Double left click on the select box for the sensor type and click on 'check' on Default value)

For Variohm Eurosensor Use Only

Authorised By: _____ Manager (Print Name)	*Allocated RMA No: _____
Authorised Signature: _____	Date: _____
Customer Advised By: _____	Date: _____