

Controlware RMA Form

Customer Service Center / Servicedesk@Controlware.de
 Phone no.: +49 6074 858-333 Fax no.: +49 6074 858-366

RMA no.

Controlware GmbH
 Goods Inwards
 Waldstraße 92
 63128 Dietzenbach
 Germany

Please follow this procedure:

1. First call our Service Desk at +49 6074 858-333
2. Our Service Desk will give you the RMA no. and will register it in our Controlware System.

Returns without RMA no. will not be accepted!

3. The RMA Form is available for download at <https://www.controlware.de/en/services/rma-service.html> or can be requested from our Service Desk via email or fax.
4. For your return shipment, please
 - repack the goods in their undamaged original packaging
 - use an exterior shipping carton and refrain from additional labelling
 - note that modules must be listed separately: We assume no responsibility for lost or misplaced modules that were not listed on this form
 - reset all passwords and delete all of your information stored on the merchandise before sending it in.
5. Any product returned without a description of the defect will incur an additional service fee.

Sender / Invoice Address

Company: _____

 Street: _____
 Postcode/ City: _____
 Contact: _____
 Phone: _____
 Fax no.: _____
 E-mail: _____

Delivery Address for return shipment (if different)

Company: _____

 Street: _____
 Postcode/ City: _____
 Contact: _____
 Phone: _____
 Fax no.: _____
 E-mail: _____

Important information for return shipment

Debitor no.: _____ **Service-Specification no.: Controlware:** _____

| Manufacturer | Product / Model Designation | Product Code | Serial no.: | CW Order no.: or Delivery Note no.: |
|--------------|-----------------------------|--------------|-------------|-------------------------------------|
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Fault description:

Reasons for the return shipment directly after receipt:

Damaged on arrival: Wrong goods delivered: Wrong quantity delivered: Goods not working:
 Others: _____

Order no. or Ref. no. if repairs are liable for costs: _____

Name, date and authorized signature of sender: _____

