

Scottech use only

Date Received

Initials

JOB #



Return Merchandise Authorisation (RMA) Form

To ensure efficient processing of your return, please fill out as much as possible and include with the item

Return all goods to either:

North Island Returns

or

South Island Returns

Scottech

Scottech

89 Colombo Street

Unit 3/492 Moorhouse Ave

Hamilton, New Zealand

Christchurch, New Zealand

EQUIPMENT DETAILS			
Item			
Serial No.			
Accessories Included <small>(e.g. cables, cases, batteries)</small>			
Fault			
Date of original purchase		Invoice No.	
Repair Purchase Order		Scottech Contact	
YOUR DETAILS (please tick if you prefer contact by phone or email)			
Contact Name			
Contact Email			Preferred <input type="checkbox"/>
Contact Phone			Preferred <input type="checkbox"/>
Company			
Branch			
Return Delivery Address			
Bill To			
<input type="checkbox"/> Quotation required before repair, a minimum workshop charge of \$45 may apply			