



Returned Material Authorization Request Form

54 Grenier Field Road

Londonderry, NH. 03053

RMA Number _____

Date : _____

All RETURNS

- Must have the RMA Number clearly printed on the outside of the package
- Must have a completed copy of this RMA form placed on the outside of the package in the packing slip envelope. If this form is not present the package will be sent back at the customer expense.
- **All SEMIGEN Product must be returned in the original SEMIGEN Packaging**

In Order to expedite your RMA process please complete the following Information:

Company Name	
Customer Part Number and Revision (if applicable)	
SEMIGEM Part Number	
Lot Number	
Date Code(s)	
Quantity Returned	
Purchase Order Number	
Where the defect was detected	<input type="checkbox"/> Incoming Inspection <input type="checkbox"/> Processing /Assembly <input type="checkbox"/> Electrical test <input type="checkbox"/> Field Failure
Return Request	<input type="checkbox"/> Repair <input type="checkbox"/> Replace <input type="checkbox"/> Credit <input type="checkbox"/> Evaluation
Complaint Details	

SEMIGEN warrants their products to be free of defects in material and workmanship for one year from the date of the original shipment. Our obligation at SEMIGEN is limited to repair, replace or credit. This warranty shall not apply to any products which have been subjected to accident, misuse, improper installation, alteration or abuse..