

Return to Manufacture Authorization

Instructions

- Complete this form.
- FAX to IPD at (978) 392-1216 for a Return Authorization number.
- Return product in Original packaging or Advance Replacement packaging.
- Be sure to mark returned package with provided Return Authorization number.

Product Serial Number (alternatively Your PO # or our Invoice #)	Product Description	Comments

- Send Advance Replacement(s) immediately (Must be within Warranty).
- Credit Account (Must be within 30 days of purchase).

Return Authorization Contact: (Required for Return Authorization Conformation)	Ship Replacement to:
Name: _____	Name: _____
Company: _____	Company: _____
Phone: _____	Address: _____
FAX: _____	City, State: _____
	Zip Code: _____

IPD Internal Use Only	
Warranty Expiration Date: _____	Return Authorization number: _____
Replacement Ship Date: _____	
Tracking Number: _____	