

EXPORT RMA FORM

ULVAC OFFICIAL USE ONLY		
SHIP TO:	CONTACT NAME:	CONTACT DATE:
	SALES ORDER #:	
	ACCOUNT #:	
	PO #:	PO DATE:
RMA #: ISSUE DATE:	REASON FOR RETURN:	
RMA # VALID FOR 30 DAYS	CREDIT DETAILS	
TECH SUPPORT:		
	OTHER (EXPLAIN):	
(CREDIT ONLY)		
CUSTOMER SUPPLIED INFORMATION - CERTIFICATE OF DECONTAMINATION		
END USER COMPANY NAME:	• PHONE:	FAX:
END USER CONTACT NAME:	• E-MAIL:	
• SERIAL #:		
DESCRIPTION OF PROBLEM:		
FEDERAL REGULATIONS PROHIBIT THE SHIPM		THAT IS IMPROPERLY PACKAGED OR INCORRECTLY
LABELED. ALL MATERIAL MUST BE CERTIFIED AS DECONTAMINATED PRIOR TO SHIPMENT. ULVAC TECHNOLOGIES RESERVES THE RIGHT TO REFUSE ANY SHIPMENT THAT IS NOT PROPERLY PACKAGED OR LABELED.		
ULVAC RESERVES THE RIGHT TO REPACKAGE/RESKID ANY RMA MATERIAL THAT IS RECEIVED WITH INADEQUATE PACKING/SKID THAT		
MAY PREVENT ULVAC FROM RETURNING THE CUSTOMER'S MATERIAL, USING THE CUSTOMER'S PACKING/SKID, IN A SAFE AND UNDAMAGED CONDITION. ULVAC WILL BACK-CHARGE CUSTOMER FOR LABOR AND MATERIALS REQUIRED.		
LIST ALL GASSES/CHEMICALS (COMMON NAMES/SPECIFIC CHEMICALS) THAT THE PRODUCT WAS EXPOSED TO DURING USE.		
• NAME OF GAS/CHEMICAL		
1: N/A	N 🗌 T 🗌 E 🗌 P 🗌	B R O O
2: N/A	N 🗌 T 🗌 E 🗌 P 🗌	B R R O D
3: N/A 🗌	N 🗌 T 🗌 E 🗌 P 🗌	B 🗌 R 🗌 O 🗌
N = NON-HAZARDOUS T - T	OXIC E = EXPLOS	SIVE P = POTENTIALLY HAZARDOUS
B = BIOLOGICAL HAZARD R = RADIOACTIVE O = OTHER (EXPLAIN)		
N/A = NOT APPLICABLE ie: ELECTRICAL/ELECTRONIC PARTS		
HAS THE UNIT BEEN DISASSEMBLED FOR COMPLETE DECONTAMINATION? • YES • NO		
IF YES, DESCRIBE PROCESS THAT WAS USED AND ATTACH PROOF OF DECONTAMINATION.		
NOTE: MS	DS REQUIRED FOR ALL LIS	TED HAZARDS
ULVAC RESERVES THE RIGHT TO RET	URN TO SENDER, AT SENDE	R'S EXPENSE, ANY PRODUCT THAT IS NOT
REPAIRABLE, THAT IS BEYOND OUR C	LEANING AND DECONTAMIN	IATION CAPABILITIES, OR THAT DOES NOT
HAVE THE CERTIFICATE OF DECO	ONTAMINATION SECTION OF	THIS RMA FORM FULLY COMPLETED.
MATERIAL MAY ONLY BE RETURNED TO	ULVAC WITH A COMPLETE	D RMA FORM AND ASSIGNED RMA NUMBER.
A COPY OF T	HIS FORM MUST BE USED AS	S A PACKING SLIP.
		SIDE OF THE SHIPPING CONTAINER.
ANY SHIPMENTS WITHOU	JT A CLEARLY VISIBLE RMA	NUMBER WILL BE REJECTED.
I AGREE THAT THE INFORMATION SUPPLIED ABOVE IS CORRECT TO THE BEST OF MY KNOWLEDGE.		
SAFETY OFFICER'S AUTHORIZATION REQUIRED IF PRODUCT HAS BEEN EXPOSED TO HAZARDOUS MATERIALS		
CUSTOMER'S RMA DATA		
COMPLETED/APPROVED BY:		• DATE:
(TYPE AUTHORIZED PERSON'S NAME & TITLE)		
REQUIRED FIELDS		