



Return Material Authorization

RMA #

DTx Part Number: _____

PN Description: _____

Customer Number: _____ Customer Name: _____

Issue Date: _____ Customer Ref.: _____

- Is the product in warranty? Yes No
- Is the return covered under an Advanced Replacement Agreement? Yes No
- Is the return for Credit Only? Yes No
- Credit, Repair and Invoice? Yes No

Section 1 - Customer Information (Completed by the customer)

Customer Contact Name: _____ Phone #: _____

Customer Part Number: _____ Quantity: _____

DTx S/N(s):

Return Address:

Explanation of Problem (as detailed as possible, e.g., Intermittent, Time to Failure, etc.)

- a) Was the product exposed to any hazardous contaminants? Yes No
- b) If YES, was product decontaminated? Yes No

Note: DTx cannot accept contaminated product for return. DTx will not issue a RMA number for return requests that include contaminated product.

Customer Representative: _____

The return must be packaged to prevent shipping damage.
Please note that shipping damage is an Out of Warranty repair.
Please annotate the DTx RMA # and attach this form to the outside of shipping container.

Address Return Shipment to: DTx
1800 Penn Street
Melbourne, Fl. 32901

Section 2 - Product Receiving Information (Completed by DTx Receiving)

- Return Verified At DTx Receiving**
- Packaging Damaged**