



SP06830 Rev. A

PO Box 15732
Brooksville, FL 34604
Phone (888) 987-8877
Fax (888) 900-8879
warranty@surgesuppression.com

RETURN AUTHORIZATION FOR WARRANTY REPLACEMENT
"FOR DAMAGED UNITS ONLY"

INSTRUCTIONS:

- 1. Complete top Portion of RA Form. If possible obtain a photo of the unit as installed in the field.
2. Please fax the completed form to: (1-352-799-6987) or email (warranty@surgesuppression.com) to obtain an R/A number.
3. INCLUDE THE FORM IN BOX WITH RETURNED PRODUCT.
4. Ship Returned Product to:

SURGE SUPPRESSION, LLC
R/A Number: [ ]
16041 FLIGHT PATH DRIVE
BROOKSVILLE, FLORIDA 34604

CURRENT DATE: \_\_\_\_\_

R/A Number: \_\_\_\_\_ Serial # Returned: \_\_\_\_\_

Model # Returned: \_\_\_\_\_ Representative/Sales Person: \_\_\_\_\_

Information Regarding R/A: [ ] Problem at power up [ ] Thunderstorms / Lightning in area

[ ] Other: \_\_\_\_\_

CUSTOMER INFORMATION:

Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

SHIP REPLACEMENT UNIT TO: (If different than above)

Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

SHIPPING INSTRUCTIONS:

[ ] Fed Ex Ground (Inside Cont'l US only) [ ] Other/Specify - (Additional charges may apply) [ ] 3rd Party Shipping

MANUFACTURING DIVISION INTERNAL USE ONLY

Date Returned Product Received: \_\_\_\_\_ Date Product Failure Analysis Rpt Completed: \_\_\_\_\_

1st time returned? If "NO" Please list previous RA#'s and original serial #/ Manufacturing date: \_\_\_\_\_

Manufacture defect? [ ] YES [ ] NO Date Replacement Product Shipped: \_\_\_\_\_

Replacement Product Model #: \_\_\_\_\_

Replacement Product Serial #: \_\_\_\_\_

