

## RMA REQUEST FORM

To expedite the processing of your RMA number, please complete the document and email to **RMA@Emergenseelight.com**. Once your RMA request is processed, you will receive a Return Merchandise Authorization number (RMA) via e-mail. Any incomplete section documents will delay processing.

**PLEASE FOLLOW THE PROCEDURE FOR DEFECTIVE UNITS:**

1. Send pictures of cartons, skids and actual fixture **RMA REQUEST RECEIVED WITHOUT PICTURES WILL NOT BE PROCESSED!!!!**
2. Photos of the actual installation site
3. A copy of the Bill of Lading (REQUIRED BY MANUFACTURER). Note: To file a damaged claim with the carrier, a signature is required.
4. Be sure to indicate if you need a replacement. We will use this form as a replacement PO.
5. Please be sure to read our Return Policy below.

**PRODUCT & RETURN INFORMATION**

PO NUMBER:		CUSTOMER NAME:	
ITEM NUMBER(S):		REPLACEMENTS NEEDED: <input type="checkbox"/> YES <input type="checkbox"/> NO	
QUANTITY:			
SHIP TO ADDRESS FOR REPLACEMENT(S):			
CITY:		STATE:	ZIP:
PLEASE INDICATE IF YOU NEED PARTS ONLY OR ENTIRE FIXTURE(S):			
If parts, please indicate:			
DATE SENT:		REASON FOR RETURN:	
PLEASE CHECK ONE: <input type="checkbox"/> Will Not Start <input type="checkbox"/> Blinking/Flicker <input type="checkbox"/> Shuts Off After Time <input type="checkbox"/> One Or More LED's Off			
Please Provide A Detailed Problem Description: (visual, sound, etc.):			

Problem occurred when: <input type="checkbox"/> Fixture ON <input type="checkbox"/> Switching ON/OFF	
Any additional electronics on the same circuit affected? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Where any fuses (such as a fuse in a hole) used? <input type="checkbox"/> YES <input type="checkbox"/> NO	What voltage is being used?
Were they blown and/or replaced? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Is any heavy machinery connected to the same circuit? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If YES, please specify:	
Any recent lightning strikes? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Is the fixture(s) operated by any type of control? (i.e. photocell, timer, dimmer) <input type="checkbox"/> YES <input type="checkbox"/> NO	
Were the fixture(s) altered in any way?	
Did a licensed electrician inspect the product(s)? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If so, what was the determination made by the electrician?	

**RETURN POLICY:**

PLEASE ALLOW 3-5 BUSINESS DAYS FOR ALL REPLACEMENT ORDERS TO BE SHIPPED, UNLESS OTHERWISE SPECIFIED. Selected product that is not defective can be returned within 30 days of invoice date along with a 35% restocking charge. EMERGENSEE LIGHTING is not responsible for concealed damage; a claim should be processed with the freight carrier company immediately. For defective units, if replacement material is required, a replacement purchase order will have to be submitted along with this form. It will be processed as a new order that will be invoiced with terms of Net 30 days. Once the defective product is returned, tested and approved for credit a credit memo will be issued. RETURNS WILL NOT BE ACCEPTED AFTER 30 DAYS. MATERIAL MUST BE RETURNED BEFORE THE EXPIRATION DATE OF THE RMA ACKNOWLEDGEMENT FORM – A CREDIT WILL NOT BE GIVEN NOR SHOULD A DEBIT BE TAKEN UNTIL THE UNITS HAVE BEEN INSPECTED AND APPROVED FOR CREDIT.