

# MOTOMAN RETURN AUTHORIZATION FORM

\*\*\*\* Each part must be processed on a separate form \*\*\*\*

\*\*\*\* Please complete top half of form and fax to 937-847-3211 \*\*\*\*

**▶▶▶ Not completing the [▶ marked] areas may delay RA # being issued ◀◀◀**

**▶ 1.) COMPANY NAME/ADDRESS**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**▶ 2.) CONTACT**

▶ **PHONE#** \_\_\_\_\_

▶ **FAX#** \_\_\_\_\_

**E-MAIL** \_\_\_\_\_

**▶ 3.) ROBOT/CONTROLLER MODEL (i.e. HP20/NX100)**

\_\_\_\_\_

**APPLICATION** \_\_\_\_\_

**INSTALL DATE** \_\_\_\_\_

▶ **FAILURE DATE** \_\_\_\_\_

**▶ 4.) MOTOMAN PART#**

\_\_\_\_\_

**▶ 5.) MODEL / TYPE #**

\_\_\_\_\_

**▶ 6.) PART SERIAL#**

\_\_\_\_\_

**▶ 7.) REASON FOR RETURN / FAILURE INFORMATION:**

▶ **ALARM # or ERROR CODE:** \_\_\_\_\_ **AXIS:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**▶ 8.) TYPE OF RETURN**

<b>RETURN TO STOCK</b>	
(PO# to be credited)	

<b>REPAIR &amp; RETURN</b>	
<b>REPAIR COSTS</b>	
(PO# for Repair)	

**PO# MUST ACCOMPANY PART FOR REPAIR**

<b>EXCHANGE CREDIT</b>	
(PO# to be credited)	

<b>WARRANTY CREDIT</b>	
(PO# to be credited)	

**▶ 9.) ROBOT ORDER#** \_\_\_\_\_ **S-** \_\_\_\_\_

**▶ 10.) Motoman Warranty ID** \_\_\_\_\_

**▶ 11.) PART REQ. / CASE NO.** \_\_\_\_\_

\*\*\*\*\*DO NOT WRITE BELOW THIS LINE\*\*\*\*\*

**MOTOMAN PART #** \_\_\_\_\_

**DESCRIPTION** \_\_\_\_\_

**RETURN#** \_\_\_\_\_

**DATE ISSUED** \_\_\_\_\_

**EXPIRES ON** \_\_\_\_\_

**EST. LEAD TIME** \_\_\_\_\_

**RETURN TO:**

<p><b>MOTOMAN INC.</b></p> <p><b>Returns Center</b></p> <p><b>805 Liberty Lane</b></p> <p><b>West Carrollton, Ohio 45449</b></p> <p style="font-size: 1.5em;"><b>Return#</b></p>
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**\*\*\*\* For further information or questions please call 937-847-3200 \*\*\*\***