



RETURN GOODS REQUEST FORM

COMPANY NAME _____	ADDRESS _____
REQUESTED BY _____	CITY _____ STATE _____
PHONE NUMBER _____	ZIP CODE _____
FAX NUMBER _____	EMAIL ADDRESS _____

INSTRUCTIONS

1. COMPLETELY FILL OUT ALL SECTIONS PERTAINING TO YOUR RETURN.
2. FAX OR EMAIL THIS RETURN REQUEST FORM TO **CHRIS PIPPIN** AS NOTED BELOW.
3. A NUMBERED RETURNED GOODS AUTHORIZATION WILL BE ISSUED AND FAXED OR EMAILED TO YOU.

RETURN CODE	REASON FOR MATERIAL RETURN
A	WARRANTY RETURN FOR REPLACEMENT - MUST INCLUDE MFG WARR. PAPERWORK OR TAGS AS NEEDED. ***
B	CORE RETURN FOR EXCHANGE CREDIT - NOT UNDER WARRANTY*
C	CORE RETURN TO BE PLACED IN CORE BANK - CUSTOMER RESPONSIBLBLE FOR UPS RETURN CHARGES*
E	PARTS ORDERED IN ERROR - RESTOCKING FEE AND RETURN FREIGHT MAY APPLY**
F	EXCESS STOCK PARTS RETURN - RESTOCKING FEE AND RETURN FREIGHT MAY APPLY**
G	PARTS SHIPPED AND RECEIVED IN ERROR**

* CORE CREDIT EXCHANGE MUST TAKE PLACE WITHIN 60 DAYS OF ORIGINAL PURCHASE

** ORIGINAL INVOICE REQUIRED TO ENSURE PROPER CREDIT

*** WARRANTY NOZZLES MUST HAVE SERIAL NUMBERS OR DATE CODES NOTED.

LINE	RETURN CODE	QUANTITY	PART NUMBER	DESCRIPTION SERIAL NUMBER, OR DATE CODE	ORIGINAL INVOICE
1					
2					
3					
4					
5					
6					

Description of warranty issue or failure / Other comments;

SHIPPING ADDRESS FOR REPLACEMENTS (IF APPLICABLE)

COMPANY NAME	
COMPANY ADDRESS	
CITY, STATE, ZIP	

Chris Pippin Phone; 800-334-6249 Fax; 602-278-6678 Email; chrisp@ansdistributing.com
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THIS IS NOT A RETURN GOODS AUTHORIZATION - ONLY A REQUEST