

Phone: 712.439.6880

Email: info@ozonesolutions.com

Fax: 712.439.6733 ozonesolutions.com

451 Black Forest Rd. | Hull, IA 51239

## RMA

KIVIA		* Date:				
To insure a	prompt service please comply w	vith the following	instructions.			
1. If th	is is NOT an Ozone Solutions product, please call (712) 439-6880 to verify service of your equipment.					
2. Inclu	lude the fully completed RMA form as well as any supporting documentation with the shipment to:					
	a. Ozone Solutions 451 Black Forest Rd Hull, IA 51239 USA					
3. All s	shipments must be shipped prepaid. Ozone Solutions will refuse any shipments sent on a collect basis.					
4. Che	eck the appropriate <u>Type of RMA</u> .					
5. Res	stocking Fee 30%					
applicable.	ict(s) arrive at our facility, it will be Please note that we will NOT be ssistance please contact Ozone	e responsible for	r products left ov	er 30 d	ays beyond this	attempt. If you require
* □ By chec	cking this box, I agree to the a	bove terms an	d instructions.			
□ Repair  * Below fiel		□ Calibra	ation / Perforn	nance	Testing	□ Lab Testing
Customer:			Contact:			
Address			City:			
State/Pro	ovince:	Zip:	Country:			
Email:			Phone:			
Qty	OZSL Item #	Item Descriptio				Serial Number
	Reason fo	r the return $ ho$	olease give a det	ailed de	escription	
	n be submitted via email, fax, or ase do not ship your equipment t				e will contact yo	ou and provide an RMA
RMA#:	Sales Order #:					

Please include copy of this RMA and Sales Order in equipment shipment.