

RMA-form

Use this form to request an RMA number, which you will need to make a return!

Your Information:

Date

Company

Address

Location

Postal Code

Country

Contact person

Phone-Nr.:

E-Mail

FAX-Nr.:

Product details:

Product name

Serial number

Order- / delivery note- /
invoice number

Error description
(Reason for RMA)

Settlement request:

☐ Warranty repair

☐ For credit

☐ Repair at customer's expense

**Thank you very much! We will continue filling it out from here. Please send the form to us at
E-Mail info@wie.gmbh or via Fax to 03 52 06 39 73 50**

Your RMA-Number:
(to be filled in by us)