

RMA Required Information

Measurement Solutions - Middle East/Africa



Contact Information

Customer Name _____ Company Name _____
 Site Address _____ Phone _____
 Address 2 _____ Email _____
 City _____ State _____ Zip Code _____ End User Name _____

Please list all items being returned for service in the space provided below.

Manufacturer _____	Model Number _____	Serial Number _____	Tag Number _____
Manufacturer _____	Model Number _____	Serial Number _____	Tag Number _____
Manufacturer _____	Model Number _____	Serial Number _____	Tag Number _____
Manufacturer _____	Model Number _____	Serial Number _____	Tag Number _____
Manufacturer _____	Model Number _____	Serial Number _____	Tag Number _____

Service Requested Date: _____

What is your reason for return?

Repair/Evaluation

Warranty Replacement

Modification

Calibration

Other

Emerson order reference number: _____

Standard (5-point)

ISO17025 (9-point)

Witness inspection

Purchase order number: _____

Additional Details:

Once completed, please email this form to MSOLLCS.MEA@emerson.com

Please print a copy of this completed form and include it and your MSDS in the box with the equipment being returned.

Thank you for placing your trust in Emerson products.