

## Return Form

This form is to request a Return Merchandise Authorization (RMA) number, that must be obtained before an Eoptis product can be returned. Fill this form in and send it via [info@eoptis.com](mailto:info@eoptis.com) or by means of a written communication sent by registered letter with receipt notice to the following address:

Eoptis SRL  
Via Alto Adige, 152  
I-38121 Trento (TN) – Italy

Together with this form, you are required to attach also the Invoice you have received. When you receive the RMA number, place this form inside the packaging and display the RMA number on the outside of the parcel in which the Products are returned. Products must be received by Eoptis within 10 days from the authorization.

### Your personal information

Name and surname \_\_\_\_\_  
Company name (\*) \_\_\_\_\_  
Address \_\_\_\_\_  
Phone number \_\_\_\_\_  
e-mail \_\_\_\_\_  
(\* ) for Business Customers only

### Product information

Product type \_\_\_\_\_  
Product serial number \_\_\_\_\_  
Invoice number \_\_\_\_\_

### Return Question

Has the product package been opened?  Yes  
 No  
Has the product been plugged or switched?  Yes  
 No  
Why are you requesting the return?  
 Right to withdraw (Consumer only)  
 Non-conforming product (Consumer only - Statutory Warranty)  
 Defective product (Manufacturer Warranty)  
 Out-of warranty repair  
 Calibration service  
 Other (please specify in the Notes field)

### Detailed description of the defect or non-conformity

### Notes

Date and Place: \_\_\_\_/\_\_\_\_/\_\_\_\_, \_\_\_\_\_  
                          day month year place

Signature of the Customer \_\_\_\_\_