



## Q-MATIC System Return Material Authorization Request

Please complete this form and fax to 2521 6118 or Email the completed form to [helpdesk@ppn.com.hk](mailto:helpdesk@ppn.com.hk)

An email approving return of material will be sent to you

Date: (DD/MM/YYYY) : \_\_\_\_\_

Company Name : \_\_\_\_\_

Name of Contact Person : \_\_\_\_\_

Tel : \_\_\_\_\_ Fax : \_\_\_\_\_ Email : \_\_\_\_\_

For RMA Use Only
RMA# _____
Issue Date _____
Total Pieces _____

### EQUIPMENT INFORMATION

(Note: If you are returning more than one item, please fill-in information below for EACH item)

Model Name: \_\_\_\_\_

Serial Number : \_\_\_\_\_

Installation Date : \_\_\_\_\_

Location of Equipment: \_\_\_\_\_

Brief Description of the Problem:

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