



RMA
Return Merchandise Authorization Form

Please fill out this form carefully. An email will be sent to you with an RMA number facilitating the follow-up of this request.

Unless otherwise stated, products are to be shipped to the following address:

Scadalliance
6855, avenue de l'Épée, Bureau 303
Montréal, Québec H3N 2C7 - Canada

Contact information

Company, City, Ministry...:
First name, Last name:
Phone:
Email:
Repair/Return Reference:

Product(s)

Installation Site(s)	Product Model(s)	Serial Number(s)	Notes

Problems

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Scadalliance Contact Person

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Comments

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IMPORTANT :
Please send us clean and decontaminated products, according to their use and condition