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| Coperion GmbH, Postfach 4065, 88219 Weingarten, Deutschland | | | | | | | | | | | | | | | | | | | | | Coperion GmbH  Niederbieger Strasse 9  88250 Weingarten, Deutschland  Werks- und Lieferanschrift:  Eisenbahnstrasse 15  88255 Baienfurt-Niederbiegen, Deutschland  Telefon +49 751 408 234  Telefax +49 751 408 521  service@coperion.com  www.coperion.com | | | | | | |
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| **Return Material Authorization**  **Originator/ Billing address: (Please complete all lines)** | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | |  |
| **Company:** | |  | | | | | | | | | | | | | | | | | |  |
| **Contact person** | | | | |  | | | | | | | | | | | | | | |  |
| **Department:** | | |  | | | | | | | | | | | | | | | | |  |
| **Street:** | | |  | | | | | | | | | | | | | | | | |  |
| **Postal Code:** | | |  | | | | | **City:** |  | | | | | | | | | | |  |
| **Phone:** | | |  | | | | | | | **Fax:** | | | |  | | | | | |  |
| **E-Mail address:** | | | |  | | | | | | | @ | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **Order no.:** | | |  | | | | | | | | | | | | | | | | |
| **Items belong to:** | | | | | |  | | | | | | | | | | | | | |
| Machine: | | | | | |  | | | | | | | | | | | | | |
| Coperion Order no..: | | | | | | |  | | | | | | | | | | | | |
| Serial no..: | | |  | | | | | | | | | | | | | | | | |
| **Items to be delivered/returned?** | | | | | | | | | | | | | | | | | | | |
| **Item description** | | | | | | | | | | | | | **Item no..** | | | **Amount** | | | **Reason for return (1)** | | | **Disposition (2)** | | |
|  | | | | | | | | | | | | |  | | |  | | |  | | |  | | |
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| **Reason for returning the materials (1)** | | | | | | | | | | | | | | | | **Disposition (2)** | | | | | | | |
| A | Malfunction(during working process) | | | | | | | | | | |  | | | | 1 | Return for credit, replacement not required \*\* | | | | | | | | |
| B | Damaged (transportation damage) | | | | | | | | | | |  | | | | 2 | Return for discharge, replacement received | | | | | | | | |
| C | Parts has to be checked / | | | | | | | | | | |  | | | | 3 | Parts replacement required | | | | | | | | |
|  | complete inspection\* | | | | | | | | | | |  | | | | 4 | To be returned after repair | | | | | | | | |
| D | Quantity difference | | | | | | | | | | |  | | | | \* | For all inspections we need a detailed | | | | | | | | |
| E | Wrong part / item delivered | | | | | | | | | | |  | | | | description of the problem | | | | | | | | | | |
| F | Wrong part ordered | | | | | | | | | | |  | | | | Further information see page 2 | | | | | | | | | | |
| G | Product shows defects | | | | | | | | | | |  | | | | **\*\*** The item(s) indicated above will be accepted for | | | | | | | | | | |
| H | Others | | | | | | | | | | |  | | | | return with the applicable restock charge. | | | | | | | | | | |
| All returned goods received by Coperion, will be inspected for any damage and needed repairwork. The buyer will be informed of these costs who will finally decide if either Coperion is to commence with the suggested repairs or if new parts/ equipment is more economical. The cost for inspection report depends on the sizing of the equipment being between 240,- and 500,- Euro. These costs will be credited back to the buyer in the event of new equipment being purchased.  **Declaration:**  The material safety data sheet(s) and / or product specification sheet including safety clearance certificate for the concerned materials to be handled, are to be included with the return delivery respectively are to be supplied beforehand.  The component has been thoroughly cleaned and is free from harmful build-up of . product. Further risks do not exist.  The following remaining residual risk exists, or could not be eliminated: | | | | | | | | | | | | | | | | | | | | | | |
| Fault description:  Please submit this form before the return delivery by fax: +49 (0) 751 408 200 and add the return delivery please provide a copy.  **Address for return delivery:**  Coperion GmbH  Eisenbahnstraße 15  88255 Baienfurt-Niederbiegen  Germany | | | | | | | | | | | | | | | | | | | | | | |
| Date: | | |  | | | | | | | | | | | |  | | | | | | | |
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| Signature: | | |  | | | | | | | | | | | | | | |  | | | | |
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| Your company stamp | | | | | | | | | | | | | | | | | | | | | | |
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