

* marked items are compulsory, to be filled in by applicant.
 ** Nextys reserves the right to not accept the products indicated in the RMA, if this form is not properly filled in all its parts.

Please tick the concerned fields

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 Phone: +41-(0) 91 840 14 46
 Fax : +41-(0) 91 840 14 47
 E-mail: customer.care@nextys.com

RMA ID:		Date:	
Responsible person in Nextys:			

This RMA form must be filled in the electronic format and sent to the above e-mail address.

APPLICANT

These parts must be completed by Applicant**	* Company Name/ Country:						Products not acceptable to be returned: - with obvious signs of tampering - with missing parts - with damaged enclosure
	* Contact Person:						
	* E-MAIL:						
	* Phone Number:						
	ID	*Product Code	*S/N	*Customer Ref.	*Purchase date	*Invoice No°	*Note
	<i>Claim Type*</i>						
	<input type="checkbox"/> Warranty repair		<input type="checkbox"/> Rework		<input type="checkbox"/> Warranty replacement		
	<input type="checkbox"/> Out of warranty		<input type="checkbox"/> Repair estimate		<input type="checkbox"/> Out of warranty replacement		
	<i>Problem description*</i>						
	Transport (must include documentation and pictures, within 3 days of receipt)						
	<input type="checkbox"/> TC Carton box		<input type="checkbox"/> TP Pallet		<input type="checkbox"/> MD Mechanical damage		
	Not conform to installation (must include pictures in order to evaluate the non conformity)						
	<input type="checkbox"/> DM Damaged		<input type="checkbox"/> MP Not complete, missing parts		<input type="checkbox"/> WL Wrong labeling		<input type="checkbox"/> OOS Out of specification
	Type of problem occurred						
<input type="checkbox"/> NS Product does not start		<input type="checkbox"/> BE Burned / Exploded		<input type="checkbox"/> LAO Led Alarm ON		<input type="checkbox"/> DO Discontinuos operation	
<input type="checkbox"/> OS Operates out of specs							
<i>Setup installation description*</i>							
Installation date: _____							
INPUT							
<input type="checkbox"/> 1PH		<input type="checkbox"/> 2PH		<input type="checkbox"/> 3PH		<input type="checkbox"/> DC	
<input type="checkbox"/> DG Diesel Generator		<input type="checkbox"/> UPS Under UPS		<input type="checkbox"/> Batt Directly on Battery			
Specify Line Voltage _____							
OUTPUT							
Parallel Connection		<input type="checkbox"/> PC Yes		<input type="checkbox"/> NPC No			
Type of Load		<input type="checkbox"/> Res Resistive		<input type="checkbox"/> Ind Inductive		<input type="checkbox"/> Cap Capacitive	
<input type="checkbox"/> Ot Other		Specify typical LOAD _____					
Environmental conditions							
<input type="checkbox"/> ≤ 45°C		<input type="checkbox"/> > 45°C		<input type="checkbox"/> Fan Forced			
<i>Short problem description*</i>							
<small>A short description is required in order to find the possible failure causes, to provide an accurate report and to prevent repeating of such situation, for a continuously better service.</small>							

Note:
 The RMA module filled is valid only for one or several devices of the same type.
 If the request includes more identical products of the same batch, indicate in the specific field the specific S/N.
 Attach extra sheets to the RMA if the module is not enough for this field.

Consult warranty terms and conditions on our website at: <http://www.nextys.com/general-sales-conditions.html>
I have read and accept Nextys General Sales Conditions.

Consult After-Sales terms and conditions on our website at: <http://nextys.com/general-after-sales-terms-and-conditions-rma.html>

I have read and accept Nextys General After-Sales Term and Conditions - RMA.