



RMA #

# Return Material Authorization (RMA) Request Form

**Customer Information**

Date:

Company:		Billing Address	Shipping Address	
Contact:				
Phone:				
Fax:				
Email:				
Part Number	Serial Number	Description of Problem	(Artel Use)	
			Warranty Status	Repair Charge

1. Complete the Customer Information section and provide the part number, serial number and a description of the problem experienced for each item you wish to return for repair.
2. Email the completed form to [sales@artel.com](mailto:sales@artel.com) or fax to (978) 263-9755.
3. We will check the warranty status and respond to you with the repair cost, RMA Number and return shipping instructions.
4. A Purchase Order or Credit Card is required for out-of-warranty repairs.
5. Mark your carton(s) with the Artel RMA Number and ship to:

Artel Video Systems  
 5B Lyberty Way  
 Westford, MA 01886