




KOSO AMERICA, INC.  
 4 Manley Street  
 W. Bridgewater, MA 02379  
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 Fax: 508.584.2525

**RETURN MATERIALS AUTHORIZATION** v. 04

DATE:	SERIAL #	RETURN SHIPPING VIA:	CUSTOMER P.O.#	Commission/Installation Date (REXA use only)
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SECTIONS 1 THRU 4 MUST BE COMPLETED BEFORE AN RMA WILL BE ISSUED.	Date Received	Date Evaluated	Date Scheduled
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<b>1 BILLING ADDRESS</b> Company: _____ Address: _____ _____ Contact: _____ Tel: _____ Fax: _____ e-mail: _____	<b>2 SHIPPING ADDRESS</b> Company: _____ Address: _____ _____ Contact: _____ Tel: _____ Fax: _____ e-mail: _____
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<b>3 ITEM(S) BEING RETURNED</b> <input type="checkbox"/> Actuator <input type="checkbox"/> Electronics <input type="checkbox"/> Other: _____ Include photo of problem & installation. Electronics: SUPPLY VOLTAGE _____ CONTROL SIGNAL _____ Last error: _____ Number of: _____ starts × 1k _____ strokes × 1k _____ Fb bad _____ Dir error _____ Cs bad _____ Drv fault _____ Stall _____ *Drive display _____	<b>ENVIRONMENTAL CONDITION:</b> Ambient Temperature _____ Location: <input type="checkbox"/> INSIDE <input type="checkbox"/> OUTSIDE	 <p>*Drive display location</p>
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**4 PROBLEM/FAILURE DESCRIPTION** (Give *detailed* description(s) to the following questions on a separate sheet of paper and attach to this form to ensure conclusive findings):

1. Date and time of failure?	5. How was the failure diagnosed?
2. When did the issue first begin? What were the characteristics of this event, and what actions were taken?	6. Have there been any recent site shutdown or restarts on the installation or associated equipment?
3. Describe the operational conditions at the time.	7. Any normal or special maintenance procedures performed over the life of the unit? What was the reason and when (compared to failure date)?
4. Describe what failed...and how.	8. What application/function does the actuator perform?

**Action Requested:**  REPAIR  TROUBLESHOOT/ADVISE  REFURBISH    **Requested Return Date:** \_\_\_\_\_

**Prepared By:** \_\_\_\_\_    **Representative:** \_\_\_\_\_

**Notes:**

1. Completing this form will ensure a faster and less costly turn around.
2. Before shipping the unit, make certain that the unit is properly cleaned to prevent injury to factory technicals while unpacking (due to hazardous substances on unit). If unit requires additional cleaning prior to receipt, turn around time and cost of order will increase.
3. Package the actuator properly and correctly to prevent damage during shipping. KOSO AMERICA is not responsible for damage during shipping.
4. A minimum 2 hour diagnostic charge will apply to all non-warranty evaluations.
5. REXA RMA number **must** appear on all packages.

REP	<input type="text"/>
%	<input type="text"/>
BC	<input type="text"/>