

Fax to: +49 212 2 58 13 - 33



Retoure / Complaint

RMA-No. _____ (assigned by argenta)

Attention: Please mark the RMA-Number in a conspicuous position on the outside of the package. We agree the retoure after an close inspection.

company: _____

customer no.: _____ phone: _____

your contact: _____ fax: _____

email: _____

order details:

(to ensure a correct and quickly processing of your retoure / complaint please fill out the following fields completely.)

your order no.: _____ our order confirmation no.: _____

our delivery note: _____ (please attach a copy of the delivery note to the return)

Part no.	Description	Quantity of retoure

Reasons of return/complaint:

typing error in order delivery too early damage in transport

no goods ordered delivery too late technical complain
(test report, samples, ...)

wrong goods others: _____

We are asking for:

replacement delivery credit advice

Condition of the goods:

not opened and original packaged package open, but all complete

others: _____

Date: _____

Signature: _____

