

Instructions for Return Goods Application

1. Complete the Return Goods Application.
2. This form may be returned via fax @ 626-810-4245 or email jliscano@tpcdental.com
3. Wait to receive a return RMA number before you ship your product. Items returned without the proper documents will be refused and returned to the shipper.
4. Mail your package with a copy of your Return Goods Application and keep a copy for your records. The mailing address is in the upper right hand corner of the Return Goods Application.
5. Once TPC receives your package for return, you will receive a fax / Email with an estimate for repair, warranty exchange or return credit.
6. Please be sure to include your original Purchase Order number and invoice number or the Return Goods Application will not be processed. There is no need to include the invoice number or PO number if the item is being returned for non warranty service only.

Thank You

Mr. Mike Carlone

Technical Support / Repair Manager

P. 626-810-4337 ext. 103

service@tpcdental.com



This document is to be completed by authorized dealers only. Incomplete applications will not be processed.

Dealer Information only

Date:	
Dealer Name	
Customer Number	
Contact Name	
Address	
Telephone Number	
Fax Number	
Email Address	
Original PO # Used if items being returned for credit or exchange.	
Invoice #	

Leave blank if item is being returned back to the dealer.

Return to Shipping Address

Office Name	
Attn To	
Address	

Special Instructions

Qty	Model / Part Number	Description of item	Serial Number	Requested Service

Symptoms

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(Factory Use Only)

Evaluation	Correction	Part Number	Price