

Doig Corporation
7400 Quail Court
Cedarburg, WI 53012
(262) 376-3644



RMA REQUEST FORM

Please Complete This Form and Return via E-mail rmas@doigcorp.com

Date: _____

1. Submitted By: _____

4. Bill To: _____

2. Phone: _____

3. E-mail: _____

5. Ship To: (If different than Bill To) _____

6. Part Number	Serial Number/Date Code/Work Order #	Quantity

7. Reason for Return (Original PO# REQUIRED for warranty or credit requests):

- ☐ Warranty Repair/Warranty Replacement Upon Evaluation
- ☐ Defective Return for Credit – Failed Product within Warranty Period (Upon Evaluation)
- ☐ Standard Return for Credit – New/Unused Product with possible restocking fee
- ☐ Non-Warranty Repair

8. (Required) Description/Symptoms Regarding the Failure/Return:

The RMA number will be provided to you via email.

PLEASE DO NOT SHIP TO DOIG