



PartsKing Return Merchandise Authorization (RMA) Form

Please fill out this form as complete and clear as possible.

Customer name _____ Customer Acct# _____

Customer Inv # _____ Reason for Return _____

Phone _____ Fax _____ Email _____

Address _____ City _____ State _____

Model _____ Ser# _____ Install date _____

Part# _____ Desc _____ Qty _____

Part# _____ Desc _____ Qty _____

Part# _____ Desc _____ Qty _____

Proof of Purchase is necessary in order to process any request for return. The items will be checked for any, and All problems listed in the RMA. ANY Physical damage or re-work done to the product, or defacing parts or Components voids any and all warranty. Your service and installation cost are non-refundable. Any package Sent back without the RMA form will not be accepted and returned to the shipper. Parts King will not and cannot Be responsible or liable thereafter.

Customer Signature _____ Date _____

PartsKing, 3729 Charlotte Ave. Nashville, Tenn. 37209

1-800-462-4814