

RMA Form

Please fill in this form as completely as possible. For more information, please refer to the RMA terms and conditions.

RMA number: (to be provided by Lumatec GmbH)

Customer details

Company name	
Street	
Postal code & city	
Contact	
Email address	
Phone number	

Device details

Product	
Serial number	
Description of the defect	

Customer's signature

.....
Date

.....
Signature