



RETURN ACCEPTANCE POLICY

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Please fill out the following form requesting information regarding the assembly purge status. We need to be aware of any gas or liquid used in the product. Failure to complete form will cause delay in the process of your RMA or Sales Order authorization.

RMA # _____

SALES ORDER # _____

To Be Completed by Customer OR Sales

Part Number _____ Serial Number _____

Has the equipment been used?

Yes ☐

No ☐

List all gases and chemicals which have come in contact with the equipment

1. INERT _____

2. CORROSIVE _____

3. FLAMMABLE _____

4. TOXIC _____

5. OTHER _____

Has the equipment been purged?

Yes ☐

No ☐

What gas was used to purge? _____

ALL Returned Equipment Must be Bagged and Capped.

The undersigned certifies that the compositions of residue on the equipment listed above are of non-hazardous nature and the equipment has been purged or flushed on-site.

Print Name: _____

Customer Signature: _____

Title: _____

Company: _____

Telephone: _____

Date: _____