

Return Authorization Request

Instructions

1. Call our support line at 877.334.6876 to obtain a Return Authorization (RA) Number.
2. Pack the item(s) securely. All returned products must be in the condition they were received in, as well as their original packing. Please remember to include all warranty cards and manuals.
3. Return only the models and quantities authorized under this Return Authorization Number
4. Complete this form and include with our return.
5. Clearly mark shipping carton with the RA#.
6. Send your package via prepaid freight to the address listed above via UPS, FedEx or insured Parcel Post. (Please note shipping charges cannot be refunded.)

Customer Information

Product Information

Name:	Model
Company Name:	Date of Purchase:
Street:	Purchased from:
City: State: Zip:	Reason for return: <input type="checkbox"/> - Return for Credit – only within 14 Days of purchase, a 15% restocking fee applies. <input type="checkbox"/> - Defective. Please repair or replace my Breathalyzer. Explain in comments section. <input type="checkbox"/> - Upgrade – Please contact me to discuss upgrading to a different Breathalyzer.
Country:	
Phone:	
Email Address:	

Customer Comments

Please add any additional information that will help us in repairing your Breathalyzer:

Customer Acknowledgement

I have read the KHN Solutions Return Policy and I certify that the information supplied on this form is correct.

Customer Signature:	Date:	RA#:
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For Office Use Only

Date Received	Technician	Test Date	Production disposition
Date Shipped		QB Invoice#	