RETURN AUTHORIZATION REQUEST FORM

CUSTOMER SERVICE DEPT. TEL NUMBER: (909) 923-3868 / FAX NUMBER: (909) 930-1344
Email: warranty@powerbassusa.com

Customer:_____

Account.#: _____

Address: _____

_____

Contact Person: _____

Contact Phone Number: _____

Contact Fax Number / Email Address:_____

Date: _____ **RA# :** _____ internal use only

Model #	Serial #	Specific Description of Problem* *(*Failure to complete will mean denial of RA*)

PLEASE RETURN ALL DEFECTIVE PRODUCTS TO:

POWERBASS U.S.A., INC. – 2133 S. GREEN PRIVADO – ONTARIO, CA 91761

PLEASE WRITE THE RA# ON ALL ADDRESS LABELS AND EACH CARTON(S) PRIOR TO SHIPPING

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