



Groseth Light

RMA form Must be filled out by the customer		
Customer Name	Name	
	Address	
	Postal no	
	City	
	Country	
Contact Info	Telephone	
	E-mail	
Product	Name	
	Description	
Complaint	Date Malfunction Discovered	
	Where was the defect discovered first?	
	Failure Details	
	Additional Details (if applicable)	
	Attachments Description/picture of problem	
Date		Customer signature

Please return this RMA form to: post@grosethlight.com

For internal use - Reserved for Groseth Light use only			
Date processed		Warranty duration	
RMA #		Supplier	
Customer service rep.			
Internal notes/ further actions			
Approved			
Declined			
Forwarded			
Describe how the problem is solved			
Date			
Signature			