



Return Request Information

Specify: WARRANTY RESTOCK SHIPPING ERROR REPAIR

Date Submitted:		Purchase Order #:	
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Product Information			
*Tekmar Product:		*Product Date Code:	
Lot #:	Serial #:	*Date Removed from Jobsite:	
*Description of Problem			

Contractor Information			
*Company Name:		*Contact Name	
Address:			
City:		State:	Zip:
*Contact Phone		Contact Email:	

Wholesaler Information			
*Company Name:		*Contact Name:	
Address:			
City:		State:	Zip:
*Contact Phone:		Contact Email:	

**information must be provided.*

Repair Requests – Return Address Information			
Company Name:		Contact Name:	
Address:			
City:		State:	Zip:
Tag Shipment:			



WASHINGTON • OREGON • IDAHO
 Phone: (503) 570-8689 Fax: (503) 570-8780

Submit to: parts@gopsi.com

ALASKA
 Phone: (907) 562-2608 Fax: (907) 562-0503

Submit to: akreception@gopsi.com

PSI Internal Use Only:

tekmar RGA Number:		Issue Date:	
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