

THIS FORM MUST INCLUDE AN AUTHORIZED RGA NUMBER IN ORDER TO RETURN PARTS

To receive your RGA number, complete this form and email to distributor@cranems.com or fax to 803-266-5150

<div style="border: 1px solid black; padding: 5px; display: inline-block; margin-bottom: 5px;">CRANE</div> Crane Merchandising Systems North American Vending <h2 style="text-align: center;">Returned Goods Authorization Request Form</h2>	<p><u>Shipping address for ALL returns</u></p> <p style="text-align: center;">Crane Merchandising Systems Returned AP-GPL-NV Parts 3330 Dixie Narco Blvd. Dock D Williston, SC 29853</p>	<p>CUSTOMER #</p>	<p>RG/RMA #</p>
<p>INSTRUCTIONS:</p> <ol style="list-style-type: none"> 1. All returns require a valid RGA # 2. Print all information clearly when completing the form. 3. Please use a separate form for each machine Serial Number 4. Indicate Action Code and Reason Code for each item. 5. All returns must include a machine or component serial number and include a completed RGA form with a valid RGA # in the upper right corner. 6. Write the RGA # on the outside of the package and include a copy of this form in the box. 			

Company Name	City, State	Customer Reference or PO Number																				
Contact Name	Customer Telephone Number	Customer Fax Number																				
Machine S/N	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td> </tr> </table>																					Component Serial Number

PARTS AND REASON FOR RETURN:						<u>REQUIRED</u>	Comments
QTY	Part Number	Description	Action Code	Reason Code	Original Invoice or Order #		

ACTION CODES		REASON CODES		<p>Terms and Conditions: Customer agrees that CMS / AP shall not be liable for any goods returned on an RGA/RMA that are lost or damaged in transit. All returns must be insured. Customer is also responsible for filing freight claims with carrier for parts shipped per the CMS / AP Parts & Support Guide. These fees may include an inspection fee and/or restocking fee. The customer will be billed for advance replacement and warranty parts pending evaluation after receipt of parts. The act of returning goods to CMS / AP indicates the customer agrees to the terms and conditions as stated on this form. Please contact CMS at 1-800-621-7278 or AP at 1-800-784-6438 to obtain a copy of the Parts & Support Guide. We reserve the right to refuse any return.</p>
Code	Description	Code	Description	
A	Warranty Return for Credit	C.1	Wrong Part Received	
B	Warranty Exchange	C.2	Wrong Part Ordered	
C	Return for Credit – New Parts Only	C.3	Incorrect Quantity	
		C.4	See in comments	
		W	Defective Part	