

Embrosin Medical Technologies Inc.

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Return Material Authorization Form (RMA Form)

		RMA #	
Office Name:		Account No.	
Doctor:		Tel:	
Street:			
City:		Province:	Postal Code:
Tel:	Fax:	Email:	

Qty	Art No.	Invoice No.	Reason for Return

Please Choose from the following:

RETURN	Exchange	Repair
Refund		
Credit On Account		

Do you need to be advised of repair/replacement charges? Yes No

Do you wish us to call you with estimate before proceeding with any repairs/replacements? Yes No

Important care and instructions for packaging and shipping

- Please cushion the products to prevent damage during shipment. Damaged products will not be accepted as return.
- Health regulations mandate that all returned instruments should be cleaned and heat sterilized prior to shipping. Unclean and non-sterilized instruments will not be processed and will be discard at customers expanses.
- Shipping fees for returning items to the customer may also be incurred by the customer.
- Signature required shipment highly recommended.