Service • Support • Success

SUBSTRATE TECHNOLOGY, INC.
1384 Bungalow Rd., Morris, IL 60450
(815) 941-4800 x1 · cindy@substratetechnology.com

EQUIPMENT REPAIR — RETURN AUTHORIZATION (RA) FORM

RA Number: _____ **Date:** _____
(RA Number assigned by Substrate Technology)

CUSTOMER INFORMATION

Company Name: _____ **Contact Name:** _____

Phone: _____ **Email:** _____

Billing Address: _____

Return Shipping Address (if different): _____

EQUIPMENT INFORMATION

Manufacturer / Brand: _____ **Model Number:** _____

Serial Number: _____ **Age / Purchase Date:** _____

Accessories Included with the Machine: _____

REASON FOR REPAIR

Describe the problem in as much detail as possible (symptoms, when it started, any error codes, etc.):

_____

_____

SERVICE TERMS & AUTHORIZATION

- A **$60 evaluation fee** applies to diagnose your machine. If you proceed with the repair, this fee is applied toward your repair cost.
- We provide a clear **repair estimate before any work begins** — no work is performed until you approve it.
- **Repair labor is warranted for 180 days** against defects in workmanship. Installed parts are covered by the applicable manufacturer's warranty or 180 days, whichever applies. Warranty covers the specific repair performed and does not cover wear parts, normal wear and tear, new or unrelated issues, or damage from misuse.
- The customer is responsible for **inbound and return shipping** unless otherwise arranged.
- Please arrange pickup or return shipping **promptly** once the repair is complete (or if you decline the repair).

By signing below, I authorize Substrate Technology, Inc. to evaluate the equipment described above and agree to the terms stated.

Signature: _____ **Date:** _____

Printed Name: _____

SHIPPING INSTRUCTIONS

1. Write your **RA Number** clearly on the outside of the box.
2. Include a copy of this completed form **inside** the box.
3. Ship to: **Substrate Technology, Inc., 1384 Bungalow Rd., Morris, IL 60450**
4. Questions? Call **(815) 941-4800 x1**.