

# RETURN/CREDIT AUTHORIZATION FORM



### IMPORTANT NOTICE

ONLY IN-HOUSE CREDIT WILL BE ISSUED FOR ANY RETURNED ITEM(S). NO MERCHANDISE MAY BE RETURNED WITHOUT PRIOR AUTHORIZATION FROM AN IMPORT COLLECTION REPRESENTATIVE. ALL RETURNS WILL BE SUBJECT TO A 20% RESTOCKING FEE.

CLAIMS MUST BE REPORTED TO IMPORT COLLECTION WITHIN 10 DAYS OF RECEIPT OF ITEM(S). CLAIMS FILED AFTER 10 DAYS ARE SUBJECT TO A 25% LATE CLAIM FEE AND/OR DENIED. PLEASE COMPLETE THIS FORM AND SEND WITH YOUR CLEAR PHOTOS OF EACH ITEMS ON THIS CLAIM, SO WE CAN PROCESS YOUR CLAIM QUICKLY AND EFFICIENTLY.

(1) YOU MUST COUNT ALL CARTONS UPON RECEIPT OF ORDER. (2) ALL PRODUCTS MUST BE INSPECTED AT THE TIME OF DELIVERY. (3) PLEASE BE SPECIFIC ON WHAT IS WRONG WITH EACH ITEM - IF IT IS A SET, SPECIFY SIZE. IF PAIR, 1PC OR PAIR. (4) KEEP ALL ORIGINAL PACKING MATERIAL AND CARTOONS UNTIL NOTIFIED. (5) NO CREDIT WILL BE ISSUED ON RETURN OF MERCHANDISE. (6) IF WE NEED TO PICK UP A PRODUCT, A CALL TAG WILL BE SENT. INSTRUCTIONS WILL BE ON THE BACK OF THE CALL TAG. (7) PRODUCT MUST BE RETURNED WITHIN 15 DAYS OF CALL TAG

PLEASE PRINT LEGIBLY

ORDER TYPE  RETURN  CREDIT

**PLEASE ALLOW 7-10 DAYS FOR PROCESSING**

STATE: \_\_\_\_\_ CUSTOMER: \_\_\_\_\_ BUSINESS NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

SHIP TO: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ RA: \_\_\_\_\_

ORDER/PO #: \_\_\_\_\_ DATE MERCHANDISE WAS RECEIVED: \_\_\_\_\_

IF MERCHANDISE IS DAMAGED, DOES IT LOOK AS THOUGH IT WAS DAMAGED IN TRANSPORT?  YES  NO

WAS FREIGHT DAMAGE NOTED AT TIME OF DELIVERY WITH TRUCK DRIVER?  YES  NO

NAME OF CARRIER: \_\_\_\_\_

### FOR OFFICE USE ONLY (SOLID BLACK BOX AREA)

SOURCE & (7) SHIP DATE: \_\_\_\_\_ TERMS: \_\_\_\_\_ SHIP VIA: \_\_\_\_\_

REP: \_\_\_\_\_ DISC: \_\_\_\_\_ INVOICE #: \_\_\_\_\_ CLAIM  YES  NO

PULLER: \_\_\_\_\_ VERIFIER: \_\_\_\_\_ PACKER: \_\_\_\_\_

QTY	ITEM #	DESCRIPTION OF PROBLEM (BE SPECIFIC)	PRICE	CODE	EXT	COM	P/U	C/R

# OF CALL TAGS		SUBTOTAL		TOTAL	
----------------	--	----------	--	-------	--

TO EXPEDITE THE CLAIM PROCESS, PLEASE EMAIL PICTURES TO YOUR CUSTOMER SERVICE REP.

AUTHORIZED BY: \_\_\_\_\_

CM #

CALL TAG (s)  
TRACKING ID