



Product Return Request Form

1. To request a product return, please complete this form, * denotes required fields.
2. Submit completed form one of two ways:
 - Email by clicking "Submit by Email" button at top of form.
 - Fax printed form to Kim Walser at MICO 507.625.3212.
3. Upon receipt of completed form, MICO will issue a Return Goods Authorization Report containing a RGA confirmation number within 1 to 2 business days.
4. After receiving the Return Goods Authorization Report with RGA confirmation number, please ship a copy of the report and product to the MICO address listed on the report. Customer is responsible for freight and all associated fees until a warranty determination is made.

*Distributor/OEM Name: _____ Date Submitted: _____

*Distributor/OEM Address: _____

*Contact Person: _____

*Phone Number: _____

Distributor/OEM ID Number: _____

For Confirmation Purposes Please Supply Email and/or Fax Number. If you DO NOT have Email or Fax Number please enter NA. If you DO NOT have the MICO Part Number please type in: Please Identify

*Email Address: _____

*Distributor/OEM Fax Number: _____

*MICO Part Number: _____ Distributor/OEM Part Number: _____

Reference Number: _____

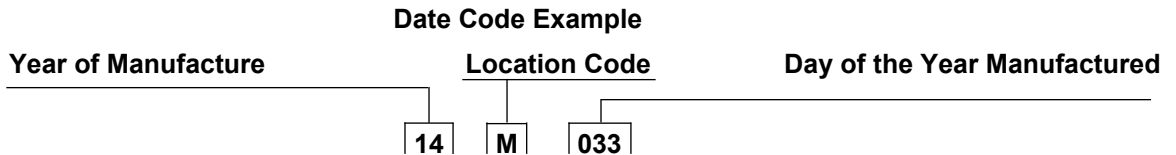
*Exported Under License? (e.g. ITAR or EAR) *Is this item US Government Property?

*Quantity: _____ Distributor/OEM Return Request Date: _____

Debit Number: _____ Debit Amount: _____

Date Code Explanation

Date Code Example: 14M033. 14 is the year of manufacture (2014) M is the manufactured location code (Mankato) 033 is the day of the year it was manufactured (February 2nd).



Date Code: _____

Invoice, Purchase Order or Packing List Number: _____

*Reason for Return: _____

Comments: _____

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Innovative Braking and Controls Worldwide

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