



RETURN AUTHORIZATION FORM

	BILLING	SHIPPING
Company name:		
Street address:		
City:		
Prov/state:		
Postal/zip:		
Country:		
Contact person:		This product was purchased: Direct from Stevens Water From distributor/reseller Name:
Phone:		
Email:		

REASON FOR RETURN:

(Please be as specific as possible. Attach documentation/photos as needed. Be sure to include serial numbers.)

Freight charges will be added for all chargeable repaired units. Warranty repaired units will be returned via UPS ground.

Note: If returned item is evaluated and customer chooses not to repair, a minimum evaluation fee of \$85.00 will be charged and return shipping cost will be added to the invoice.

Date	Signature

Please complete, sign, and send this form along with your shipment to:

STEVENS WATER MONITORING SYSTEMS, INC.
 Attn: STEVENS REPAIRS
 12067 NE Glenn Widing Dr., Suite 106
 Portland, OR 97220