+GF+ GEORG FISCHER PIPING SYSTEMS

RMA #	
CAQ #	

Request for Return Material Authorization/Evaluation / Analysis

RIGHT TO KNOW NOTICE:
Per Hazardous Material Federal Law, any material exposed to process chemicals/substances requires disclosure, proper handling and shipment. Please fill out Material Safety Disclosure section to be submitted before returning exposed materials to GF and include a copy with the returned material. CUSTOMERS ARE RESPONSIBLE FOR DECONTAMINATION AND PROPER SHIPMENT OF ANY RETURNED MATERIALS. Failure to properly decontaminate returned material will result in shipment refusal or additional cost for third party decontamination, and/or disposal.

Please fill in the applicable information in the fields provided below to better serve you and prevent delays processing your claim.
Fax this form to: Georg Fischer LLC, Irvine, CA Fax # (800) 426-7188

☐ **New Part** ☐ **Used Part** (Provide in the fields below information for the applicable processes/conditions to prevent evaluation delays) **Date:** _____

End-User Company: _____ **Contact:** _____ **Email/Tel:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

GF Distributor: _____ **Contact:** _____ **Email/Tel:** _____

Part No.: _____ **Desc.:** _____ **PO#:** _____ **Purch. Date** _____ **Qty:** _____

Description of Problem:

Description of application:

Commissioning Test System Test Method (if applicable): ☐ **Hydro** ☐ **Air** ☐ **Visual:**					
Testing PSI:		**Duration:**		**Pump Type:** ☐ **Slow Start** ☐ **Full On** ☐ **VFD**	

Installation Date: _____ **Initial Operation Date:** _____ **Failure Date:** _____
Approximate Usage: **Cycles Per Hour:** _____ **Cycles Per Day:** _____ **Cycles Per Month:** _____

Ambient Temperature		Process Temperature (°F) Range		Working Pressure Range		Flow Rate Range (gpm/lpm)	
Min:		Min:		Min:		Min:	
Max:		Max:		Max:		Max:	
Typ:		Typ:		Typ:			
		Thermal Cycling: ☐ Yes ☐ No		☐ Fluctuation:			

Media (1)			Media (2)			Media (3)			Media (4)		
Conc. %	Solid %	Solid Size	Conc. %	Solid %	Solid Size	Conc. %	Solid %	Solid Size	Conc. %	Solid %	Solid Size

Installation: ☐ **Indoor** ☐ **Outdoor** ☐ **Exposed to Sunlight** ☐ **On the wall** ☐ **Suspended** ☐ **Horizontal** ☐ **Vertical**

Processing Actions / Remarks

☐ System Down ☐ Replacement Required ☐ Replacement Received
☐ Obtain customer authorization before performing non-warranty repairs
☐ Submitted for Evaluation and results only (no other action required); When completed ☐ scrap / ☐ return evaluated material.
Return address/instructions _____

Signet Parameters: ☐ **pH/ORP** ☐ **Conductivity/Resistivity** ☐ **Turbidity** ☐ **Chlorine** ☐ **Flow** *(For calibration fill out shaded fields)*

Sensor	Pipe Size	Pipe Matl.	Schedule	K-Factor	Pipe Straight Run	Comments

Valves:

If Actuated: ☐ **Electric** **Supply voltage:** _____ **Approx. cycles/Hr:** _____
☐ **Pneumatic** **Air Supply Pressure:** _____ **PSI** **Pilot Valve** ☐ **3-Way** ☐ **4-Way**

Accessories: ☐ **Manual-Override** ☐ **Limit Switches** ☐ **Stroke Limiter** ☐ **Speed Control** **Other:** _____

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MATERIAL SAFETY DISCLOSURE

RIGHT TO KNOW NOTICE:

If the material being returned has been exposed to process fluids, it is a legal requirement for customer/user to decontaminate the item(s), disclose hazardous chemicals/substances, and provide corresponding Material Safety Data Sheets. **This Disclosure must be included with the shipment of product to GF or the product will be subject to refusal and will be returned to customer.** Failure to properly decontaminate material being returned will result in significant additional costs for third party decontamination, and or proper disposal.

✓ **PLEASE CHECK APPROPRIATE BOX**

☐ **I/ we hereby certify that all of the above listed material (product) being returned to Georg Fischer for service or evaluation was NOT exposed to any chemicals or hazardous materials, and is safe for handling.**

☐ **I/ we hereby certify that all of the above listed material (product) being returned to Georg Fischer for service or evaluation WAS exposed to the following chemicals or hazardous materials and has been properly decontaminated and can be safely handled.**

LIST OF CHEMICALS/SUBSTANCES				
	HAZARD INFORMATION			
Chemical/Substance	Health	Flammability	Reactivity	Personal Protection

- **To certify the above information is correct please complete the following:**

Signature: _____ **Title:** _____

Print Name: _____ **Date:** _____

Company: _____ **Telephone:** _____

- **The original of this form must be included with material (product) being returned. Please put the above-referenced Tracking # on outside of shipping box.**

- **Please fax this form to Georg Fischer LLC, Irvine, CA Attn: Inside Sales (800) 426-7188**

Attention: _____

Please print the name of the Customer/Technical Service Representative (if available) to help us process your paperwork.