

RETURN TO MANUFACTURER AUTHORIZATION



KONGSBERG

| CUSTOMER INFORMATION | | |
|---------------------------|--|------------------|
| Name: | | Billing address: |
| Company name: | | |
| Email: | | |
| Tel. Number: | | |
| End User / Vessel Number: | | |

| RETURN SHIPPING INFORMATION | | |
|-----------------------------|--|--------------------------|
| Delivery service: | | Return shipping address: |
| Account Number: | | |
| Tax ID / EIN: | | |
| Receiver name: | | |
| Receiver Tel No.: | | |
| Waybill Number: | | |
| Requested date of return: | | |
| Special Instructions: | | |

| PRODUCT INFORMATION | | | | | FOR OFFICE USE | | |
|-------------------------|------|-----------------------|-------------|---------------|----------------|-----------|----------|
| Item | Qty. | Kongsberg Part Number | Description | Serial Number | Customs Value | Date Rcvd | Rcvd. By |
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | | | | | | |
| Description of problem: | | | | | | | |
| Additional notes: | | | | | | | |

| TERMS AND CONDITIONS |
|--|
| <p>Equipment that remains at our facility longer than three (3) months is subject to a storage fee. This fee will be the equivalent of 1 hour labor for each month that it remains at our facility longer than three months. If the equipment is at our facility for longer than six (6) months, without agreement to proceed with repairs, the equipment will be returned at the owner's expense and the above mentioned storage fee will be invoiced, at Kongsberg's discretion.</p> <p>I agree to the above terms and conditions.</p> |

| FOR OFFICE USE | | | |
|-------------------------|-----------------|-------------------|-------------------|
| RMA Number: | | Customer No.: | |
| Return shipping method: | Ground | Air | Date required: |
| Warranty | Out of Warranty | Repair and Return | Return for Credit |
| Issued by: | | Date: | Other (see above) |