

 Integrated Control Systems Inc.

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## **Returned Goods Authorization Form**

End User Company Name		ICS Distributor	ICS Distributor Company Name (Purchased from)	
Street Address for return shipm	ent			
City	State	Zip	Phone #	
Return Item part number (Please submit one RGA form per		form per item)	Serial #	
			ssible. Please answer the following ntact you about the product in the interest	
Please describe product failure	as completely as p	ossible		
How long was product in operat	ion?			
For pulser returns, please list th	e type of register a	and console pulser	was connected to.	
Person to contact about failure	Em	ail Address	Phone #	
Please fill out this form complet signature must be present with			ess above. This form with RGA number and I.	
damage (i.e. pulser wires cut shi product is determined to be und remanufactured product. The wa	ort, parts missing, ler warranty, it will arranty for replacer warranty products	circuit boards brok be replaced either ment products will prepaid via UPS gr	ets which cannot be tested due to physical ken etc.) will not be covered. If the returned with a new product, or an equivalent be the remainder of the original product ound shipment only. If a product is tailing the reasons.	
I understand and agree to the at	oove conditions:			

Signature

Date