

Return Authorization Form

Certified Appliance Parts
393 Fortune Blvd.
Milford, MA 01757
800-305-0722

RA# _____

*Issue Date: _____

Date Received: _____

Date Credited: _____

Please fill out all fields with *

	*Part #	*Inv. No.	*Cost
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____

*Name: _____

Restock Fee: _____

*Contact Person: _____

Service Co to Pay freight: _____

*Service CO: _____

*Street: _____

*City, State, Zip: _____

*Reason for Return: _____

Please Email Completed Request to CAP@certifiedapplianceparts.com for

Processing *Recommended Disposition:

Notes:

Any Product being returned as new that comes back repacked will be refused by our Warehouse. Boxes to be clear of all stickers and markings.

Please tape 1 copy of RA to the Product

***** RA EXPIRES 14 DAYS AFTER THE ISSUE DATE *****