



RGa REQUEST FORM

Date: _____

Distributor Information:

Distributor Name: _____

Address: _____

City, State, Zip: _____

Contact Name: _____

Phone / Email: _____

Lamp/Fixture Location (Return label will be sent to this address):

End User: _____

Reason For Return:

Overstock

Job Overage

Defective

Other

Operating Environment: Indoor Outdoor Downlight Track Gimbal Ring _____

Explanation of Defect or Return:

Quantity:	Serial No:	Product Code:	Invoice No.	Date:	Original PO:
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Submitted By: _____

Please review the Solais Lighting Group Warranty + Terms sections at www.solais.com for compliance on your return.

Submit
returns@solais.com
 or fax: 888.232.1086

For Office Use Only:

Restocking Charge: _____%

RGa No. Assigned: _____

Date: _____