**Return Material Authorization Information Form**

**Completely fill out this form and email** **anthony.wright@curtisswright.com** **for an RMA number. Failure to do so will delay the RMA process.**

**Date:**Click or tap here to enter text.

**RMA#** Click or tap here to enter text.

**Customer Information**

**Company Name:**Click or tap here to enter text.

**Contact Person:**Click or tap here to enter text.

**Email:**Click or tap here to enter text.

**Product Information**

**Model:** Click or tap here to enter text.

**Serial Number:**Click or tap here to enter text.

1. **What is the nature of the failure (Please provide detailed information as to what happened at time of failure):** Click or tap here to enter text.

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1. **Would it be possible to zip up your TTCware project and send it in?**

[ ]  Yes [ ]  No

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1. **Did you try swapping with another card and did that card work? (N/A if not applicable)** [ ]  Yes [ ]  No [ ]  N/A

**If yes, please explain**Click or tap here to enter text.

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1. **Is there any visible damage to the hardware?**Click or tap here to enter text.

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1. **Has the failure been verified in a controlled laboratory environment?**

[ ]  Yes Click or tap here to enter text.

[ ]  No Click or tap here to enter text.

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1. **Which TTC employees have you been working with?**

Click or tap here to enter text.

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1. **If hardware, software and firmware changes/upgrades are found on the returned equipment, should they be applied?**[ ]  Yes [ ]  No

Click or tap here to enter text.

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1. **Company (Return to):** Click or tap here to enter text.

**Address:** *Click or tap here to enter text.*

**City, State and zip:** *Click or tap here to enter text.*