MODINE RMA FORM 82-100

Fill out form completely and email to: hvac&r@modine.com

Reason For Return: [   ] Select Reason For Return

Details:
[   ]

Customer / Order Information:

Request Date:	[ ]	Today's Date
Purchase Date:	[ ]	Date item was purchased
Requested by:	[ ]	
Rep#	[ ]	Rep Code
Customer Name:	[ ]	Enter Customer Name
Customer Ref#	[ ]	PO Number
Modine Order#	[ ]	6-digit Order Number
Modine Invoice#	[ ]	8-digit Invoice Number

Material To Be Returned By:

Name	[ ]
Street	[ ]
City	[ ]
State	[ ]
Zip	[ ]

Send RMA To:

Name	[ ]
Email Address	[ ]

ITEM(S) BEING RETURNED:

Item, Model, or Part Number	Item Name / Description	Serial Number	Qty

1.050