



Modine RMA Form

Fill out form completely and email to: returns@bjterroni.com

Reason for Return: _____

Details:

Customer / Order Information:

Request Date: _____ Today's Date

Purchase Date: _____ Date item was purchased

Customer Name: _____ Your company name

Customer PO Number: _____ Your company's PO number the item was purchased on

Order Number: _____

Invoice Number: _____ Invoice number from B.J. Terroni

Material to be Returned by:

Name: _____ This information is for the company submitting the return

Street Address: _____

City: _____

State: _____

Zip: _____

Send RMA to:

Name: _____ The RMA will be emailed to this individual

Email Address: _____

Item(s) Being Returned:

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