

RMA #

	Billing Info	Return Controller To
Contact Name:		
Phone #:		
E-Mail:		
Address:		
Address:		
City, State, Zip		
PO Reference #:		
Shipping Instructions:	<input type="checkbox"/> Expedite Shipment <input type="checkbox"/> Insure Shipment	
Unless otherwise noted; (1) All return shipments will be shipped uninsured via UPS Ground; (2) Insured shipments are insured for the amount of the repair cost. Shipping and insurance costs are added to invoice. All repairs are warranted for one year.		

PLEASE DESCRIBE PROBLEM WITH AS MUCH DETAIL AS POSSIBLE:

CONTROLLER INFORMATION:

Network Controller Type:	Firmware Version	Software Version	MAC Address or Serial #
<input type="checkbox"/> NCRE (old style standard) <input type="checkbox"/> NCRE/A (new style standard) <input type="checkbox"/> NCREL/A (new style mini) <input type="checkbox"/> Other _____			
Application Controller Type:	Type <small>(ie; VAV8623)</small>	Firmware Version	Part #
<input type="checkbox"/> Smart2 <input type="checkbox"/> Smart1 <input type="checkbox"/> SMVU <input type="checkbox"/> Other _____			
Service Tool:	Type <small>(ie; brown or white)</small>	Firmware Version	Keypads are not repairable and cannot be guaranteed.
<input type="checkbox"/> Smart2 Service Tool			

METCON REPAIR NOTES & COMMENTS:

Ship controllers to be repaired to:
 MetCon, LLC 15335 SE Ten Eyck Rd Sandy, OR 97055
 (503) 720-0895 fax (503) 501-4959