

**Please complete and return this form
along with the faulty goods to:**
Service Dept – service@prolinkbrands.co.nz
Prolink Asia Limited
25 Aerovista Pl, Wiri,
Auckland 2104



ProlinkBrands

RETURN AUTHORISATION FORM

RMA NUMBER

CUSTOMER CLAIM No: _____
DATE _____
CONSIGNMENT NOTE _____

STORE DETAILS

NAME _____
STORE ADDRESS _____
EMAIL _____
PHONE _____ CONTACT PERSON _____

CUSTOMER DETAILS

NAME _____
ADDRESS _____
EMAIL _____
PHONE _____ PURCHASE DATE _____

MODEL	DESCRIPTION	QTY

FAULT DESCRIPTION:

ACCESSORIES RETURNED WITH FAULTY PRODUCT	QTY

25 Aerovista Pl, Wiri, Auckland 2104
P.O Box 132 398, Sylvia Park, Auckland 1644,
New Zealand
Phone: +64 9 588 4444 | Fax: +64 9 573 3000