

# Unique Safety Products RMA formulier

Complete this form and send it to [sales@usp-safety.com](mailto:sales@usp-safety.com)

## Return address

Unique Safety Products  
T.a.v. Afd. Returns Van  
't Hoffstraat 4  
2665 JL Bleiswijk  
The Netherlands

RMA-nummer to be completed by USP

RMA-Number

Date

/ /

## Your Details

Company Name

Contact Person

Address (no PO box)

Zipcode and city

Country

Phone number

E-mail address

## Delivery address - Only complete if this differs from the company details

Company Name

Contact Person

Address (no PO box)

Zipcode and city

Country

Phone number

E-mail address

USP sales order number

SO.

## RMA-details

1. Article number	Serial Number	Engraving	Key number	Master series
Complaint description				

2. Article number	Serial Number	Engraving	Key number	Master series
Complaint description				

3. Article number	Serial Number	Engraving	Key number	Master series
Complaint description				

**RMA conditions**

1. The products should be properly packed.
2. Please send the products together with the correct RMA form.
3. Clearly state the RMA number on the outside of the packaging.
4. Email this form to sales@usp-safety.com.
5. Provide a clear complaint description and description of the returning products.  
E.g. return products actuator, door lock and key.
6. If necessary, add a separate complaint description.
7. Take into account a repair period of 1 to 3 weeks.

*The following information will be completed by USP*

Contact Person USP	
Return-number supplier	
UPS Track and Trace	
Note	