



### RETURN GOODS AUTHORIZATION

ATTN: GREG FAWCETT gregf@westeckwindows.com RGA FAX Number: 1 604 792 6714  
Triggers for use when customer wishes to return product.

RGA No.:

Date:

#### PART 1 - IDENTIFICATION OF CUSTOMER AND ORDER

<b>Contact Name:</b> _____	<b>Company Name:</b> _____
<b>Email Address:</b> _____	<b>Site Address:</b> _____
<b>Fax:</b> _____	<b>Street:</b> _____
<b>Bus.Phone Number:</b> _____	<b>Prov/State:</b> _____
<b>Cell number:</b> _____	<b>Postal/Zip:</b> _____
<b>Original Westeck Quote number:</b> _____	<b>Original Westeck W/O number:</b> _____
<b>Sales Rep.</b> _____	<input type="checkbox"/> Doors <input type="checkbox"/> Windows

#### PART 2 - IDENTIFICATION OF PRODUCT

No:	Product to Return:	Quantity:	Line No:	Reason for Return:
1				
2				
3				
4				
5				

<i>Did not Need</i>	<i>Defective less than 30 days</i>	<i>Sales Order Error</i>
<i>Incomplete Product</i>	<i>Freight Damaged</i>	<i>Customer order Error</i>
<i>Wrong Size Product</i>	<i>Did not match Purchase Order</i>	<i>Other: Please indicate</i>

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Sales Rep Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### PART 3 - Office Only

What is to be done with returned Goods? \_\_\_\_\_

Is there New paperwork Required? Y / N Chargeable? Y / N

Rework Required: Y / N From Department(s): \_\_\_\_\_

Rework Detail: \_\_\_\_\_

New/Repaired Product Shipping Detail: \_\_\_\_\_

GM Authorization Signature: \_\_\_\_\_

RGA Application has been completed and action has been initiated.