

RMA Inspection Report

Report Date:	RMA Number:
Customer Name:	Contact:
Product Model:	Serial Number:
Received Date:	Inspected By:

Reason for Return

Visual Inspection

Functional Test

Findings & Diagnosis

Disposition

☐ Repair

☐ Replacement

☐ Return as is

☐ Credit

☐ Other:

Additional Notes

Inspector Signature

Date