Beyond the Embedded Deployment								
TEL +86 0755 85269856 • Fax :	0755 85269856 • <u>www.polyl</u>	h <u>ex.net</u> • service@po	lyhex.net			RMA	Request For	
Polyhex Customer Info:			RMA Request Form					
Company Name		E-mail Address		Address				
Contact		Phone number		City State Zip Code				
p to address:		<mark>Do you</mark>	need a blind drop ship? 🛛 Yes 🔤 🕅					
Company Name Contact		E-mail Address Phone number		Address City State Zip Code				
Model Number	Serial Number		Description of Pro			Device Password	Invoice #	
Woder Humber	Serial Number		(Please describe in as much a	letail as possible)		(If known)	(If known)	
RMA Process Notes and Things to	Remember_							
Please make sure to enter our com	pany's product model in the "Mo	odel Number" field.						
This form is to request RMA from	our company, but it is not an off	icial RMA form for prod	luct return. Within 24 hours of receipt of you	ur request, we will provide yo	ou with an o	official RMA form (See next	page for	
the official RMA form template).								
Without receiving an official RMA	A form from us, please do not ser	nd out the returning mer	chandise. Returned product that does not ha	we the official RMA form wil	l be returne	d to the customer.		
Upon receipt of our official RMA	-	-						
	* *		r 24 hours, please contact us at service@po	lvhex.net Option 3 and our te	chnicians	will assist you to complete t	he RMA	
process over the e-mail.		ing and rain request to		ing and option 5 and our to		assist you to complete t		
	amplata our tachnisians will	ntaat you yia a mail	hip 24 hours of reasint of your result of 1	against you to finish the DMA	PPOOOCCCCCCCCCCCCC			
-	•	-	hin 24 hours of receipt of your request and		-			
*		•	Polyhex, and the company will cover the co					
The normal shipping method for R	MAs is UPS ground at no cost to	the customer. If expedit	ed shipping such as Next Day, 2nd Day, etc	. is requested, it can be done a	at the custor	mer's expense.		

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Return to RMA Department							RM	A II	
Customer Billing Address							Shipping A	Addres	8
Company Name Contact: Address:	:					Company I Contact: Address:	Name:		
City	State	ZIP Cou	ntry			City	State	ZIP	Country
RMA #	Issue Da	le Date RMA Expire		Status		Return Type		RMA Created By	
Model Number				Description					Qty to Return
Same as RMA R Polyhex Model		Discription of a Sales Order # S/N: Warranty Type		urn from RMA Request form arranty	Warran	ty Expire Date:			
Same as RMA R Polyhex Model		Discription of Sales Order # S/N: Warranty Type		turn from RMA Request form urranty	Warran	ty Expire Date:			

Attached to this email is the RMA form to be included with your returned product(s). Please print out the RMA form and place it on the outside of the shipping carton. Failure to include the RMA form can result in a delay when processing the return. The original product must be placed in a separate shipping carton. Do not mark or damage the original packaging and try to return as much of the accessories and paperwork as possible with the product. If the RMA is for a 30 Day Return, any missing parts or damaged packaging may result in a restocking fee to be subtracted from the account credit or refund. Returned products must be sent within 15 days after the RMA creation date, or the RMA will no longer be valid.

Advanced replacement is authorized by user agreement to **Polyhex Inc**. terms. If returned product is not defective or repairable, the product will be returned to the customer at 60% of the price. Advanced replacements are evaluated and issued on a per case basis. Abuse (multiple returned working products) may result in the revoking of the right to advanced replacement. Returned products must be sent within 10 business days after the advanced replacement is processed, or payment account may be temporarily charged for replacement product.