



Return Authorisation

COMPANY NAME _____ CONTACT NUMBERS _____ (PH)

CONTACT NAME _____ (FX)

ADDRESS _____

_____ POSTCODE _____

EMAIL _____ DATE _____

Invoice no.	Item Name	Serial no.	Fault Description

Terms of Return Authorisation

1. This RA form must be completed in full and faxed to Apus for approval. A RA number will be issued once approval has been made.
2. All products must be properly packed when returned.
3. RA numbers must be clearly marked on each item to be returned. Failure to do so may significantly delay the RA process.
4. If customers return products due to cancellations, they MUST be in original retail condition. Apus cannot accept cancelled orders if products are of unsatisfactory conditions.
5. Defective products must be returned within 14 days from date of issue of RA number, otherwise a new RA number must be requested.
6. For cancellation of orders (within 14 days), credit notes will reflect the prices shown on the customer's purchase invoice. A 15% restocking fee will be applicable.
7. For cancellation of orders or incorrect purchases, products must be returned within 3 working days after issue of RA number or they will not be accepted.
8. All shipping costs incurred when sending products for return are at customer's expense.
9. A \$30 service charge will be applicable if no hardware fault is found.
10. These Terms & Conditions are subject to change without notice.

I HAVE READ AND UNDERSTAND THE TERMS AND CONDITIONS OF RETURN

Signature _____ * Date _____

*RA number will NOT be issued without customer's signature

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Office Use Only

RA no. _____
 Date Issued _____