



2815 Colonnades Court  
Peachtree Corners, GA 30071

## Warranty Request Form

### Instructions: \_\_\_\_\_

Please complete this report and E-mail or fax to: 866-204-1498, [warranty@techtopynd.com](mailto:warranty@techtopynd.com) You will be contacted shortly by Techtop with instructions.

Requesting: \_\_\_\_\_ CREDIT:   
(Choose One) REPLACEMENT:

Purchase Date: \_\_\_\_\_

Invoice number for motor purchase: \_\_\_\_\_

### Customer (Distributor/Shop) \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State: \_\_\_\_\_

Zip Code : \_\_\_\_\_

E-Mail address for RMA delivery : \_\_\_\_\_

### Shipment Address (If requesting replacement) \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State \_\_\_\_\_

Zip Code \_\_\_\_\_

### Nameplate Data \_\_\_\_\_

Model Number: \_\_\_\_\_

Manufacture Date: \_\_\_\_\_

### Service Data \_\_\_\_\_

Date Installed: \_\_\_\_\_

Date Failed: \_\_\_\_\_

Customer Complaint:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cause of failure: (In your Opinion):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Application Data \_\_\_\_\_

Type of Equipment: \_\_\_\_\_

Variable Frequency Drive: Yes \_\_\_\_\_ No \_\_\_\_\_

#### If Yes

Manufacturer Name and Model: \_\_\_\_\_

Length of Power Leads: \_\_\_\_\_

Carrier Frequency: \_\_\_\_\_

If No, Starting Method: \_\_\_\_\_

### Coupling Method: (check one) \_\_\_\_\_

Flexible Coupling: \_\_\_\_\_

Direct Coupled: \_\_\_\_\_

Belted: \_\_\_\_\_

### For Belted Application \_\_\_\_\_

Driver Sheave Diameter: \_\_\_\_\_

Driven Sheave Diameter: \_\_\_\_\_

Type of Belts: \_\_\_\_\_

Number of Belts: \_\_\_\_\_

Distance Between Centers: \_\_\_\_\_

### Below for Techtop use only

RMA Number: \_\_\_\_\_ Date: \_\_\_\_\_

Field Scrap: \_\_\_\_\_ Return to Techtop: \_\_\_\_\_

Approved for Credit only: \_\_\_\_\_  
Signature

Approved Replacement: \_\_\_\_\_  
Signature

Inspection Required: \_\_\_\_\_  
Signature

**If motor is approved for field scrap, please return the physical nameplates a copy of the original invoice and this form to:**

**Attn: Warranty Dept.  
Techtop Industries, Inc  
2815 Colonnades Court  
Peachtree Corners, GA 30071**

**If motor is to be returned to Techtop, you will be contacted, please prepare the motor for pickup.**

**If an inspection is required, Techtop will contact you to schedule the inspection. Disposition of your request will be completed upon completion of the report.**

**Credit will be applied to your account upon receipt of the above. If a replacement is approved and invoice for your replacement will be issued upon shipment and a credit will be issued upon receipt of the above.**