

<b>Return Merchandise Authorization for Devices and Sensors</b> <i>RMA-Formular für Geräte und Sensoren</i>		<b>RMA:</b> <i>(to be filled in by / auszufüllen von Böning Automationstechnologie GmbH &amp; Co. KG)</i>	
To allow our Service Support Team to respond more efficiently to your request, we kindly ask you to complete this form by providing the requested information.  <b>Please do not return any material, before receiving an RMA number.</b>		Damit unser Kundenservice effizienter auf Ihre Anfrage reagieren kann, bitten wir Sie, dieses Formular durch die Bereitstellung der angeforderten Informationen zu vervollständigen.  <b>Bitte versenden Sie keine Ware, bevor Sie eine RMA-Nummer erhalten haben.</b>	
<b>Client / Company Name:</b> <i>Kunde / Firmenname:</i>		<b>Represented by:</b> <i>Vertreten durch:</i>	
<b>Invoice Address:</b> <i>(Rechnungsanschrift):</i>		<b>Shipping Address (if different from above):</b> <i>Lieferanschrift (falls abweichend):</i>	
<b>Reference No (if any):</b> <i>Referenz-Nr. (falls vorhanden):</i>  <b>e.g. ship name, project name, order no.</b> <i>Z. B. Schiffsname, Projektname etc.</i>		<b>Contact (Phone / Email):</b> <i>Kontakt (Telefon / E-Mail):</i>	
<b>Customer ID (if any):</b> <i>Kundennummer (falls vorhanden):</i>	<b>Part No.:</b> <i>Teilenummer:</i>	<b>Serial No.:</b> <i>Seriennummer:</i>	<b>Quantity:</b> <i>Menge:</i>
<b>Component Description:</b> <i>Teilebezeichnung:</i>		<b>Enclosed Accessories:</b> <i>Beiliegendes Zubehör:</i>	
<b>Description of Fault / Reason for Return:</b> <i>(Fehlerbeschreibung / Rücksendegrund)</i>			
<b>Warranty</b> <input type="checkbox"/> <i>Gewährleistung</i>		<b>Return of Goods</b> <input type="checkbox"/> <i>Warenrücklieferung</i>	
<b>No Warranty</b> <input type="checkbox"/> <i>Keine Gewährleistung</i>		<b>Advance Replacement Received?</b> <input type="checkbox"/> <i>Haben Sie Vorrersatz erhalten?</i>	
		<b>Repair</b> <input type="checkbox"/> <i>Reparatur</i>	
		<b>Cost Estimate Required</b> <input type="checkbox"/> <i>Kostenvoranschlag erwünscht</i>	
<b>Please return this completed RMA form by fax to: +49 4221 9475 - 9110</b> <i>Bitte senden Sie das ausgefüllte Formular per Fax an: +49 4221 9475 - 9110:</i>		<b>Orr by e-mail: <a href="mailto:rma@boening.com">rma@boening.com</a></b> <i>Oder als E-Mail: <a href="mailto:rma@boening.com">rma@boening.com</a></i>	
<b>When returning a sensor please complete page 2 and 3 as well.</b> <i>Falls ein Sensor zurückgesendet wird füllen Sie bitte auch Seite 2 und 3 aus.</i>			

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 Local court: Oldenburg HRB 141420  
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<b>Dokumentenversion:</b>	<b>Datum der Veröffentlichung:</b>	<b>Dokumentnummer:</b>	<b>Seite 1 von 3</b>
5.0	27.07.2022	FB-052-DE	
<b>Verantwortlich:</b> 10 Geschäftsführung (GF) / 110 Vertrieb / Aftersales / Innendienst / # Leitung Aftersales			

## !!! Return of Sensor (Only for Sensors) !!!

### Sender

### Recipient

Company:	Böning Automationstechnologie GmbH & Co. KG
Department:	
Street:	Am Steenöver 4
City / Country:	27777 Ganderkesee Germany
Contact person:	
Customer number:	
Phone:	+49 4221 9475-0
Fax:	+49 4221 9475-222
E-Mail:	<a href="mailto:info@boening.com">info@boening.com</a>

### Information about the Sensor

Device type: \_\_\_\_\_

Serial number: \_\_\_\_\_

Order code: \_\_\_\_\_

Order number: \_\_\_\_\_

The following field **must** be completed!  
Returns in which this field is not completed will **not** be processed.  
If another substance than fresh water, drinking water or sea water was measured, it is **imperative** to complete the enclosed declaration of decontamination.  
Returns without a required, but not completed declaration of decontamination will **not** be processed.

Measured substance: \_\_\_\_\_

Paste-like:       Liquid:       Gaseous:

Temperature of the substance: \_\_\_\_\_

Ambient temperature: \_\_\_\_\_

Pressure: \_\_\_\_\_

Remarks: \_\_\_\_\_

Method of cleaning: \_\_\_\_\_

Cleaning agent: \_\_\_\_\_

Used in a humid environment:       Used outdoors:

### Reason for Return of the Goods

Repair:       Warranty case / Claim:       Check:

Fault description / Other: \_\_\_\_\_

Estimate of cost desired:

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

## Declaration of Decontamination

Dear customer,

To protect the environment and our employees we ask you to let us know whether the device you send to us came into contact with harmful substances. Please enclose a completed declaration of decontamination for every device. In the case of well founded doubts we **cannot** begin to analyze the fault or the repair for safety reasons.

### Information about the Device

Device type: \_\_\_\_\_

Serial number: \_\_\_\_\_

Order code: \_\_\_\_\_

Order number: \_\_\_\_\_

Measured substance: \_\_\_\_\_ pH-value: \_\_\_\_\_

Cleaning agent: \_\_\_\_\_ pH-value: \_\_\_\_\_

The device came into contact with the following harmful substances:

1	2	3	4	5	6	7	8
							
Flammable	Biologically hazardous	Explosive	Corrosive	Injurious to health	Poisonous	Other hazards	Radioactive
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Harmful Substances with which the Device Came into Contact:**

We certify that the device mentioned above is free from harmful substances or was decontaminated professionally in compliance with the pertaining regulations. The information in the declaration of decontamination is complete and true.

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