

BREAKAWAY RETURN TAG

No warranty accepted without tag filled out and attached to product.

ASC (This section of tag to be completed by ASC)	
ASC Company: ASC Tech Name: ASC #: Service Date:	Site Name: Site Street Address: Site City, State & Zip: Site Phone #:
Claim Serial #:(product removed from service) Replacement Serial #:	Breakaway Type (check one): ☐ Balance ☐ Assist ☐ Conventional
Check Reason for Return – at least one box below must be checked to be considered for a warranty claim: Connection or thread problem Failed regulatory test	
DISTRIBUTOR (This section of tag to be completed by Distributor)	
Distributor Name: Street Address: City, State & Zip: Distributor Phone #:	
RGA#: Distributor should check off ALL of the below items for accurate warranty claim processing: RGA number is obtained and filled in within the Distributor section Replacement Serial # is filled in (refer to the ASC section above) Verify the Reason for Return is filled in (refer to the ASC section above)	
PRODUCT RETURN	
Return product to: Vapor Systems Technologies, Inc. 650 Pleasant Valley Drive 1-888-VST-HOSE 59ringboro, Ohio 45066 Website: www.vsthose.com 650 Pleasant Valley Drive 1-888-878-4673 650 Pleasant Valley Drive 1-888-878-878-878-878-878-878-878-878-87	