

RMA REQUEST FORM

Please provide all information requested below

E-mail Instructions: Download file to computer. Open file (not within browser)
Fill out form and re-save the file with your name in the title. Attach saved file in email. Send!

Fax to (407) 426-7716 or e-mail to returns@hg2lighting.com

Date:							
Compa	ny Name:						
Phone No.:			Fax No.:				
Email:							
Purchase Date:			PO/Invoice:				
Distribu	utor Name:						
Serial No.:			Color:				
Size:		68" ossfire		60" Truck Tail Side Runner			
	Custom	:					
Vehicle (Year, Make, Model):							
Side: Driver's Side Passenger's Side							
Direction of wire: Front Wheel Rear Wheel							
Reason for Return:							
Physical Signs of Damage:							
Shippir	ng Address:						
Citv:				State:			Zip:

