

CAR #:	
Date received:	

RMA Form

Address (delivery)					
Company:			Street:		
Number:		Zip Code:		City:	
Country:			Phone:		

Product information			
Product type(s):			
Product serial number(s):			
Product firmware:		System configuration attached in the email?	☐ Yes ☐ No

Issue: (describe in detail)

Initial review¹:
Action plan¹:

Warranty period¹:	
☐ Warranty is valid ☐ Warranty expired	
Estimated service cost: (for repairs/services not covered by warranty)	

Customer approval (I agree to the terms and conditions and understand that charges may be incurred if the defect falls outside the warranty or is caused by misuse.)	
(name/date/signature)	
Approval by:	

¹ Disclaimer: The information in this section is based on data reported remotely and is intended for preliminary assessment. This information is subject to change following a thorough on-site investigation. Final findings and conclusions may differ from the information presented here.

A Bosch Company

4EVAC - TDP4EVAC - ODP

² Disclaimer: This is the final warranty status, established after an on-site product condition assessment and verification of the warranty period.