

Trans-Cal Industries, Inc.  
Return Material Authorization (RMA)

If your Trans-Cal instrument is in need of rebuild and or calibration, or you believe the instrument has failed within the warranty period, you will need to obtain a Return Material Authorization number prior to returning the device.

The RMA form may be obtained on our website at [www.trans-cal.com](http://www.trans-cal.com) or by contacting us directly at:

Trans-Cal Industries Inc.  
16141 Cohasset St.  
Van Nuys, CA 91406  
(818)787-1221 x 400 Phone (818)787-8916 FAX [cosmo@trans-cal.com](mailto:cosmo@trans-cal.com)

Complete, sign and return the RMA form found below. The RMA number and shipping instructions will be assigned by TCI. The following terms apply to material returned to TCI:

- Remove TCI instruments from any fixture(s), and package to prevent damage during shipping.
- There is a flat **\$150.00** evaluation/bench test fee for Solid-State units, and **\$200.00** for the Model D120-P2-T. This fee is waived upon approval of rebuild/calibration costs or credited toward the purchase of a new unit.
- If a warranty is claimed but is rejected due to damage or negligence, then you are responsible for the evaluation fee and the cost to replace the instrument.
- If the reported discrepancy is not confirmed then a quote to rebuild/recalibrate the instrument will be forwarded to you. If you decline to have the instrument rebuilt/recalibrated then you are responsible for the evaluation/bench test fee and the product will be returned to you “as found.”
- If TCI declares an instrument “not airworthy” and you decline the rebuild required to bring it into conformance, then TCI will require a signed certification that the article will not be used or conveyed for use in aviation.
- If the instrument is in need of rebuild, we will contact you with a quote for approval. At that time, we will require a revised purchase order with credit card information and authorized signature.
- **If TCI does not receive a response within 45 days after the initial quote, the unit will be scrapped on site.**

# Trans-Cal Industries, Inc.

16141 COHASSET ST., VAN NUYS, CA 91406

## Return Material Authorization

*Customer:	
*Contact Name:	
*Address:	
*Phone Number:	FAX #
E-Mail Address:	
Today's Date:	
*Model No. & Serial No.	
*Date Purchased:	
RMA Request Type:	<input type="checkbox"/> Evaluation <input type="checkbox"/> Calibration <input type="checkbox"/> Rebuild <input type="checkbox"/> Warranty Claim
*Payment Method	<input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> AMEX Please fill in your credit card account# _____ Exp. _____ Security Code _____ <input type="checkbox"/> Company P.O.#
Shipping Method	UPS: <input type="checkbox"/> Gnd <input type="checkbox"/> 2 DAY <input type="checkbox"/> 3 DAY <input type="checkbox"/> Next Day
	FED EX: <input type="checkbox"/> 2 <sup>nd</sup> Day <input type="checkbox"/> 3 Day <input type="checkbox"/> Next Day
	Please fill in your UPS or Fed Ex account# _____ or <input type="checkbox"/> Prepay and add to invoice.
*Reason for return, describe the failure. Be as specific as possible, use additional pages, if required:	
<b>*Transponder Make &amp; Model:</b>	
Estimated Hours of Use:	
**TCI Assigned RMA#:	

\*Required Field      \*\*Call for TCI assigned RMA number.  
The undersigned agrees to the charges as outlined above.

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