# **Return Request Form-Domestic Shipments Only**

* Thank you for your Return Authorization Inquiry, please complete this form, **return in Word format**. You will be provided a Return Authorization Number once the form is reviewed.
* POC information and return shipping address is required. The POC will receive the RMA number and shipping instructions.
* You will receive separate Return Authorization Numbers for goggles, Intensifiers or non-serialized parts
* \*Indicates required field
* Send this completed form (**return in Word format**) to: [NVwarranty@elbitsystems-us.com](mailto:NVwarranty@elbitsystems-us.com). If you have any questions, you can reach us M-T/F 7am-4pm EST at the email or by phone at 540-362-7397 or 1-800-360-6054.

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| --- | --- |
| **\*DATE:** |  |
| **\*NAME (POC) FOR THIS REQUEST:** |  |
| **\*POC EMAIL ADDRESS:** |  |
| **\*POC PHONE NUMBER:** |  |
| **ADDITIONAL CONTACT EMAILS:** |  |
| **\*POC RETURN SHIPPING ADDRESS:**  **NOTE: No APO, FPO, PO addresses, must be street address.** | |  |  | | --- | --- | | (COMPANY) NAME |  | | ATTN |  | | STREET |  | | CITY, STATE, ZIP |  | |
| **\*BILLING ADDRESS IF DIFFERENT FROM SHIPPING ADDRESS:** | |  |  | | --- | --- | | (COMPANY) NAME |  | | ATTN |  | | STREET |  | | CITY, STATE, ZIP |  | |
|  | |
| **SERIAL NUMBERS OF INDIVIDUAL IMAGE INTENSIFIERS :**  **NOTE: ELBIT CAGE CODE 13567,**  **Serial numbers contain 7 digits**  **One item per line.**  **Use TAB to Insert additional lines as required or attach excel sheet** | |  |  | | --- | --- | | Intensifier SN | Description of defect | |  |  | |  |  | |  |  | |  |  | |
| **SERIAL NUMBERS OF GOGGLES:**  **NOTE: ELBIT CAGE CODE 13567,**  **One item per line.**  **Use TAB to Insert additional lines as required or attach excel sheet** | |  |  | | --- | --- | | Goggle SN | Description of defect | |  |  | |  |  | |  |  | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **\*ITEMS WITHOUT SERIAL NUMBER:**  **NOTE: ELBIT CAGE CODE 13567,**  **Insert additional lines (use Tab) as required or attach excel sheet** | |  |  |  |  | | --- | --- | --- | --- | | ESA Sales Order # | ESA Part Number | Quantity | Description of defect(S) | |  |  |  |  | |