



REQUEST FOR RGA

This form must be submitted for Approval
before returning your product!
Call 303.341.1845 with questions

Date: _____

Company: _____ Phone: _____

Requested by: _____ Fax: _____

Your P.O.: _____

We are requesting to return: _____

Reason for return: _____

APPROVED

RG#: _____

Restocking charge: _____

****Tub MUST be returned in good condition****

Inspected by: _____

NOT APPROVED

Cannot be returned

Reason: _____

PLEASE DO NOT RETURN YOUR TUB WITHOUT A RGA NUMBER!

When returning the product, a copy of this RGA paperwork must be with the tub!

You will receive a fax to your request within 1 to 2 business days.

Either FAX This form to: **303.341.1850** OR
EMAIL to: **david@HydroMassageProducts.com**