

## LIMITED WARRANTY CLAIM REPORT

ATTENTION- Invoice / Packing Slips must be attached to this form !!

Enter RA# Below

Dealer: _____	NSP Account #: _____
Address: _____	Contact: _____
City, ST, Zip: _____	Phone & Fax #: _____

Please Select one...

Channel	<input type="checkbox"/> Ricoh	<input type="checkbox"/> Savin	<input type="checkbox"/> Lanier	<input type="checkbox"/> RMAP--See Policy
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<b>For Ricoh Use Only</b>
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#	Part Number	Description	Machine Serial Number		Date of Defect (mm/dd/yr)	Qty	Credit Approved	
			Invoice Number				Yes	No
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								

Make copies if additional lines are needed.

### Instructions:

1. If part fails in a new machine, provide Invoice or Serial Number for Machine / Accessory in the indicated area above.
2. Attach copies of the Invoices or Packing Slips for machines & accessories to show proof of original purchase.
3. Attach copies of the Invoices or Packing Slips for the replacement part(s) purchased.
4. Fill out this form completely. Part must cost more than \$200.00 (Lowest Dealer Price) to be eligible for warranty. Assemblies are not accepted.
5. After completing this form, call 1-800-55RICOH to request a Return Authorization Number (RA#)
6. There is a charge of \$35.00 if the part is determined to be out of warranty.
7. Dealer is responsible for shipping costs in all cases, such as, shipments sent to Ricoh and return freight costs.
8. Any packages shipped "collect" will be refused and returned to sender.
9. Once you have the RA#, send the part(s) along with a copy of this form and the required paperwork to the following address...

**Ricoh Americas Corporation**  
**TSSC Warranty (North Building C - DOCK 8)**  
**19 C Chapin Rd., Pine Brook N.J. 07058**

10. Consult the Ricoh Dealer Service Policy Manual for further details and procedures.

\*\*Please contact your Field Representative for an Exceptional Warranty Approval on items that do not qualify through the warranty program.

\_\_\_\_\_  
Dealer Signature

\_\_\_\_\_  
Warranty Mgr. Signature

\_\_\_\_\_  
Field Rep. Signature

**Only applies to Excep.Warranty  
Claims by Field Rep.**

Field Rep must call 1-800- 55RICOH  
(before signing above)