



Distributor Warranty Parts Credit Request

Date: _____ Phone #: _____
 Distributor Name: _____ Fax #: _____
 Distributor Address: _____ Email: _____
 Distributor City: _____ State: _____ Zip Code: _____

Please fax to: **678-829-1639** or email to: **warrantyclaims@rinnai.us**

Part #1	Case or Incident	Credit or Replacement
Debit Memo #	_____	
Part Number	_____	
Part Description	_____	
Original PO/Invoice Number	<small>(if you order part(s) from your RDC, you MUST provide the RDC PO # to Rinnai)</small>	
Description of Failure	_____	
Model Number	_____	
Serial Number	_____	
Commercial	Residential	
Unit Installation Date	_____	

Part #2	Case or Incident	Credit or Replacement
Debit Memo #	_____	
Part Number	_____	
Part Description	_____	
Original PO/Invoice Number	<small>(if you order part(s) from your RDC, you MUST provide the RDC PO # to Rinnai)</small>	
Description of Failure	_____	
Model Number	_____	
Serial Number	_____	
Commercial	Residential	
Unit Installation Date	_____	

Part #3	Case or Incident	Credit or Replacement
Debit Memo #	_____	
Part Number	_____	
Part Description	_____	
Original PO/Invoice Number	<small>(if you order part(s) from your RDC, you MUST provide the RDC PO # to Rinnai)</small>	
Description of Failure	_____	
Model Number	_____	
Serial Number	_____	
Commercial	Residential	
Unit Installation Date	_____	

Part #4	Case or Incident	Credit or Replacement
Debit Memo #	_____	
Part Number	_____	
Part Description	_____	
Original PO/Invoice Number	<small>(if you order part(s) from your RDC, you MUST provide the RDC PO # to Rinnai)</small>	
Description of Failure	_____	
Model Number	_____	
Serial Number	_____	
Commercial	Residential	
Unit Installation Date	_____	

Part #5	Case or Incident	Credit or Replacement
Debit Memo #	_____	
Part Number	_____	
Part Description	_____	
Original PO/Invoice Number	<small>(if you order part(s) from your RDC, you MUST provide the RDC PO # to Rinnai)</small>	
Description of Failure	_____	
Model Number	_____	
Serial Number	_____	
Commercial	Residential	
Unit Installation Date	_____	

Part #6	Case or Incident	Credit or Replacement
Debit Memo #	_____	
Part Number	_____	
Part Description	_____	
Original PO/Invoice Number	<small>(if you order part(s) from your RDC, you MUST provide the RDC PO # to Rinnai)</small>	
Description of Failure	_____	
Model Number	_____	
Serial Number	_____	
Commercial	Residential	
Unit Installation Date	_____	