

RETURNED GOODS AUTHORIZATION (RGA) FORM



FORM NO: MCR-C-0001-6
 ISSUE DATE: July 2021

P.O. NUMBER: _____
 DATE: _____

INVOICE TO:	MOOG REPAIR RETURN	SHIP TO:
<p>CUSTOMER: _____</p> <p>ADDRESS-1: _____</p> <p>ADDRESS-2: _____</p> <p>CITY: _____</p> <p>STATE / PROV: _____</p> <p>POSTAL CODE: _____</p> <p>COUNTRY: _____</p> <p>CONTACT: _____</p> <p>PHONE: _____</p> <p>E-MAIL: _____</p> <p>E-MAIL 2: _____</p>	<p>RETURN ADDRESS: Moog Inc. Industrial Group ATTN: Repair Services 300 Jamison Road, Building 11D Elma, NY 14059</p> <p>Shipping verification: 716-687-7191</p> <hr/> <p>PLEASE INCLUDE THIS RGA WITH YOUR SHIPMENT</p>	<p>CUSTOMER: _____</p> <p>ADDRESS-1: _____</p> <p>ADDRESS-2: _____</p> <p>CITY: _____</p> <p>STATE / PROV: _____</p> <p>POSTAL CODE: _____</p> <p>COUNTRY: _____</p> <p>ATTN: _____</p> <p>REF CUST. PO: _____</p> <p>SHIP VIA / SERVICE: _____</p> <p>CARRIER / ACCT #: _____</p>

	Warranty	LINE ITEM	MOOG PART NO.	SERIAL NO.	REASON FOR RETURN OR WARRANTY CLAIM	
	W					Check here if order includes a special agreement. Please provide details below: <div style="border: 1px solid black; height: 150px; width: 100%;"></div>

SERVICE INSTRUCTION CODE: W = Warranty Review Request (Inspection)



SUBMIT