

# **RMA / Warranty Consideration Form**

**Diesel Controls Inc  
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Massillon OH 44647  
866-767-6664  
Fax 330-837-9855  
DCI@DieselNext.com**



## **General Information**

**www.DieselNext.com**

**Today's Date  
Customer / Company Name  
Contact Name  
Contact Phone Number  
Contact Email Address**

## **Product Information**

**DCI Invoice Number  
DCI Invoice Date  
DCI Part / Product Number  
Reason for Return (*If Unused  
Product, A 15% Restocking Fee  
Will Apply*)**

**If Returning for Warranty Consideration, Please Fill Out Remainder of Form**

## **Engine Information**

**Engine Year  
Engine Make  
Engine Model  
Vehicle VIN**

## **Failure Information**

**Install Date & Mileage  
Failure Data & Mileage  
When Failure Occurs  
Diagnostic Tools Used  
Fault Codes  
Diagnostic Tests Performed  
Diagnostic Test Results**

**Please DO NOT write below this line / DCI Internal Use Only**

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**Manager Approval  
Date Approved  
RMA Number**