

DMA	<b>#</b> •
<b>NI'IA</b>	#.

CUSTOMER INFORMATION						
Name:		Company:				
Address:						
City:		State:		Zip:		
Phone:	Fax:		Email:			
PLEASE PROVIDE PICTURES OF PUMP, PARTS AND/OR SYSTEM, WHEN POSSIBLE. THIS, ALONG WITH A COMPLETE DESCRIPTION OF THE PROBLEM AND COMPLETE APPLICATION INFORMATION, WILL GREATLY REDUCE THE EVALUATION AND RMA PROCESSING TIME. NOTE: This form must be completely filled out before an RMA will be issued. No RMAs will be accepted or evaluated without an RMA number and proper authorization from Franklin Electric. A copy of the customer return authorization form must accompany all returned items. Shipments without authorization or paperwork will be refused at the discretion of Franklin Electric. Collect freight will not be accepted.						

## \*DESCRIPTION OF FAILURE/OTHER NOTES AND SPECIFICATIONS

*Pump End Serial	#:	Pump Model #:		*Unit Hours:	
<b>OPERATING COND</b> *Flow (GPM):	<b>ITIONS</b> *TDH (ft.):	Suction F	PSI:	Discharge PSI:	
*Pump RPM @ Tii	me of Failure:	Suction Condition (ft):		Suction Lift	Flooded Suction
Discharge Head (†	ft):	NPSHA (ft):		Feet Above Sea Level:	
<b>LIQUID</b> *Liquid Pumped: Dynamic Viscosity	γ (lbs/ft²):	Solid Size: ): Specific Gravity: Concer		In Temperature (°F): tration: pH:	
*Motor Details	<b>CONFIGURATION</b> etails Make/Model: Make/Model: Phase:	Hertz:	HP: Service Factor:	Serial #: RPM:	Volts:

\*Indicates required information to be supplied by customer prior to issue of RMA number (see note at top of form)