



## RETURN MERCHANDISE (RMA) FORM

Print and complete this form. Include it with your returned merchandise.

### Returning An Order

We want you to be 100% satisfied with your shopping experience at Aquarium Life Support Systems. If you aren't completely happy with something you've purchased from us and it meets the qualifications below you may return it. All items are subject to a 15% restocking fee.

### Qualifications for your returns:

- 1) The product must have been purchased within the last 15 days and be in its original packaging in resalable condition. Foods must be unopened.
- 2) The items must not look used or worn.
- 3) We do not refund shipping and handling unless it is due to a shipping error on our part.
- 4) If you wish to return any item, it must be returned with the completed Merchandise Return Form included with your order and a Return Merchandise Authorization (RMA) number. This information helps ensure quick and proper handling of the returned item. Place either this form, or a copy of it, and a copy of your Invoice inside the package. Carefully wrap your package, insure, and ship it to:

**Aquarium Life Support Systems, Returns Department at 1737 Louisville Dr, Knoxville, TN 37921.**

If you have questions or need an RMA number you may e-mail us at [cs@aqualifesupport.com](mailto:cs@aqualifesupport.com) or call Aquarium Life Support Systems at 865/588-0108. With your e-mail, please include a phone number should we have to contact you.

### Damaged Merchandise

We pack all merchandise to meet UPS shipping standards. Occasionally, though, merchandise arrives damaged.

Have your UPS driver note the damage to the package. Inspect your shipment carefully. If you receive damaged items, contact us immediately by e-mail at [cs@aqualifesupport.com](mailto:cs@aqualifesupport.com) or call Aquarium Life Support Systems at 865/588-0108.

Customer \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_

e-mail \_\_\_\_\_

Reason for Return \_\_\_\_\_

Signature \_\_\_\_\_

Order # \_\_\_\_\_

Purchase Date \_\_\_\_\_ Return Date \_\_\_\_\_

RMA# \_\_\_\_\_

Credit Card # \_\_\_\_\_

Exp Date \_\_\_\_\_

Contact \_\_\_\_\_

#### Office Use Only:

ALSS Manager \_\_\_\_\_

Condition of Package \_\_\_\_\_

Condition of Merchandise \_\_\_\_\_