Return Material Authorization Number

Company Name       Your Name       Date

Address

City, State, Zip       Phone

Fax       Email

Valve serial number(s) and description of item(s) being returned:

Reason for Return:

Returned For:

Under Warranty:

If you would like a repair, please check one of the following:

[ ]  Provide estimate before repairing

**[ ]**  Proceed with repair using attached purchase order (PO Number       )

Badger Meter classifies returned material into three categories for proper handling. Please check one:

[ ]  New and unused; has never been installed in the field.

[ ]  Used and not contaminated; has been installed but has never come in contact with a material listed in 40 CFR 372.45, 40 CFR 355 appendix A and B, or any other hazardous material. Returned goods MUST be accompanied by certification as to its use and with a proper MSDS form.

[ ]  Used and contaminated; has been installed and has come in contact with a material listed in 40 CFR 372.45, 40 CFR 355 appendix A and B, or any other hazardous material.

 **Must be accompanied with a MSDS form and this signed form indicating that the product has been completely disassembled, cleaned and made chemically inert with no trace of chemical. Valve disassembly must include removal of all threaded, wetted parts including seat, bonnet, and packing material.**

I do hereby certify that the goods listed above fall within the description of the category checked and that I have complied with the stated requirements; also, that all goods being returned are included in the above listing.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name

Company       Date Goods Returned

Please complete all blanks. This form must be placed in the box along with returned material and any certifications, purchase orders and MSDS sheets required. For more information, contact Steve Floyd at 918-831-0230 or sfloyd@badgermeter.com.