

Credit Request Form

Fox Appliance Parts of Atlanta

Date _____

Company Name _____

Phone # _____

Account # _____

Fax # _____

Contact Name _____

Email _____

Comments

For proper credit please fill out as completely as possible and include with returned parts.

If you are faxing request for authorization, fax to: 404-362-2989 or 1-800-243-8369

Credit requests can also be emailed to sales@foxatlanta.com

Return Codes

NPR: New part return	WPS: Wrong part sent	WPE: Wrong part in box
DNO: Did not order	COR: Core return	

PART NUMBER	QTY	Return code	ORDER/INVOICE #	RA # (if required)	Comments

All returns are subject to inspection and final approval

Please print a copy of this form and attach it to your return.

For Internal Use Only

Store Location _____

Received By _____

Approved By _____

Credit Memo # _____