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Warranty Return Form

In order to help us expedite your instrument return/warranty repair, please complete the form below. Ship the instrument along with a copy of this form and a copy of the original Invoice (if invoice not on hand, please call for a copy) to the above address. **This form and a copy of the original Invoice MUST accompany the unit.**

DATE: _____

NAME: _____ COMPANY NAME: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP CODE: _____ COUNTRY: _____

PHONE NO'S: _____ FAX: _____

EMAIL: _____ INVOICE#: _____

MODEL NO: _____ P/N: _____ SERIAL NO: _____

PURCHASE DATE: _____ INSTALLATION DATE: _____

RETURN DATE: DATE: _____ HOURS IN SERVICE BEFORE UNIT FAILED: _____

AIRPLANE MAKE/MODEL: _____ YEAR: _____ N#: _____

PANEL INFORMATION: DEGREE TOWARD NOSE: _____

Description of problem: Please give as much detail as possible before and after the failure. If additional space is needed, please attached a separate sheet of paper.

