VIKING PUMP, INC., A UNIT of IDEX Corporation

## **WARRANTY AND SERVICE** RETURN AUTHORIZATION FORM

SHIP TO: **711 VIKING RD CEDAR FALLS, IOWA 50613 ATTTN: WARRANTY AND SERVICE** 

	but minimal amounts of fluid.

- 2) Complete information on the form below. Retain a copy for your records. (Electronic Format or Paper)
- 3) Enclose copy of RA as the packing list and clearly mark exterior of package with RA number.
- 4) Enclose copy of required MSDS sheet. See Federal Hazard Communications Standards section below.
- 5) Ship transportation prepaid to: Viking Pump, Inc. 711 Viking Rd., Cedar Falls, Iowa 50613.

R.A. NUMBER

2141519

Attn: warranty and Service.									
ACTION REQUESTED: TYPE OF RETURN:			RETURN:	CUST. ACCT. NO. 13189742					
(Select all t	that may apply)	(Only one item may be checked)			SOLD TO: Marengo Fab Steel				
- NO RETURN		- WARRANT	1	Yes	CONTACT	NAME:	Kandis Mount		
- REPAIR QUOTE		- POLICY			PHONE: 567-233-3190				
- REPLACEMENT		- REPAIR			EMAIL:	kmount@	@mfsparts.com		
- CREDIT		- STOCK RET	ΓURN		SALES OF	RDER NO.	661876		
- METLAB ANALYSI	s	- STOCK EXC	CHANGE		INV. NO				
- ENG.ANALYSIS		- OTHER (	(explain in comments)		CUST. ORIGINAL P.O. NO. 0003602				
Completed By:									
Formal Report Requ	uired	CAR NUMBI	CAR NUMBER:		CUST. RETURN P.O. NO. IF REPAIR AND RETURN				
	LACT REPORT								
Detailed Report:		AFTER EVALUATION HAS BEEN			AFTER REPAIR, RETURN TO:				
Short Summary Rep	port:	PROVIDED THE PUMP WILL BE HELD FOR 15 BUSINESS DAYS AWAITING		If return deemed "not Warranty", is a repair quote needed?					
				ON REGARDING THE N OF PUMP.	Customer	requested	completion date:		8/16/2021
QTY.	PART / LM NUM	IBER	DI	ESCRIPTION		SERIAL	NUMBER(S)		PROBLEM / DEFECT
1	77-00397		SG05	10 with -21H motor				m	notor is sparking/smoking
COMMENTS/DET	AIL:								
Pump station instal	led 3/23/21. After resettii	ng motor, it sp	oarked and	smoked. Warranty eva	luation requ	ired.			

REQUIRED INFORMATION FROM CUSTOMER					
SITE NAME:	INLET PRESSURE:				
END USER:	CHARGE PUMP MODEL/IMPELLER TRIM SIZE:				
START UP DATE:	DISCHARGE PRESSURE:				
SHIP DATE:	VISCOSITY:				
FAILURE DATE:	SPEED:				
BBL'S PUMPED	PRODUCT PUMPED:				

## FEDERAL HAZARD COMMUNICATIONS STANDARDS

If the equipment listed above has been operated, factory review and approval of the Material Safety Data Sheet covering the material(s) handled by the equipment MUST be reviewed prior to Return Authorization being issued or returned to factory. HAS THE EQUIPMENT BEEN OPERATED?

Yes

IF YES, INDICATE THE Material Manufacturer and Material Name. Send copy of MSDS. cooking oil

ASSIGNED BY VIKING PUMP, INC. Viking Pump, Inc. reserves the right to return any equipment and /or materials received. \*Any equipment that is received and found to be containing more than minimal residual amounts of product / materials will be returned COLLECT.

DISTRICT MANAGER APPROVAL: 41 DATE: 7/26/2021 Jim Bruggeman