



Return Materials Authorization Request Form (RMA)

3500 SW 42nd Avenue
Palm City, FL 34990
T: 1.800.340.TILE (8453)
www.internationalwholesaletile.com
E-MAIL TO: support@iwt-tile.com
FAX TO: 772.403.5010

PLEASE REVIEW OUR RETURN POLICY BELOW PRIOR TO COMPLETING THE RMA REQUEST FORM

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| <ul style="list-style-type: none">Material returns must be in excess of \$50 per invoice.Material must be returned within 30 days of date of receipt.Restocking charge is 25% of returned material cost.Material must be prepared for return shipment as follows:<ol style="list-style-type: none">1) Material must be packaged in the original carton(s).2) Boxes must be stacked upright, shrink wrapped and strapped to a pallet with RMA paperwork attached.3) Material returned via UPS must be packaged properly. IWT will not credit material that is returned damaged. | <ul style="list-style-type: none">Upon request, IWT will quote return freight and upon approval make arrangements for return.Material must be available for pick-up on the Return Pick-up Date to avoid additional freight charges.Credit will only be issued for material received in resellable condition. Discontinued or close-out materials are not returnable.Material shade must be in stock for a credit to be issued. |
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IF YOUR PENDING RETURN MEETS OUR POLICY CRITERIA, PLEASE COMPLETE REQUESTED INFORMATION BELOW

Complete requested information below and fax/email to: **772.403.5010 or support@iwt-tile.com**

IWT Customer Name: _____ Date: _____

IWT Customer Acct #: _____ PO/Order/Invoice #: _____

IWT Customer E-mail: _____ IWT Invoice Date: _____

IWT Customer Fax #: _____ IWT Customer phone #: _____

Material to be returned: _____ Warehouse Pickup Hours: _____

IWT Item Description	Color	Shade	Size	# Boxes	# Pieces

Reason for return:

Customer authorization of fees. Please sign, date and fax/e-mail RMA form to: **772.403.5010 or support@iwt-tile.com**

➤By signing here, you agree to full 25% restocking fee and freight costs to return material back to IWT.

➤If you require fees to be quoted, please do not sign and we will send a confirmation with fees to be approved.

Customer Printed Name

Authorized Customer Signature

Authorization Date