NOTE: Any merchandise received that is not listed on this form will not be processed!

ALL FIELDS ON FORM
MUST BE COMPLETED.



Return Request Form

NOR CAL 800.634.9990 x504 FAX 800 634 9977

FAX 800.634.9977
ca.returns@hvdrofarm.com

SO CAL 800.634.9990 x330 FAX 562.282.4868 *la.returns@hydrofarm.com* NW PORTLAND 800.634.9990 x356 FAX 503.813.7662 or.returns@hydrofarm.com MOUNTAIN 800.634.9990 x570 FAX 888.857.2200 co.returns@hydrofarm.com

EAST

888.780.4567 x610 FAX 800.587.0507

AX 800.587.0507 **ırns@hydrofarm.com**

CENTRAL 800.634.9999 x290 FAX 877.634.9996

tx.returns@hydrofarm.com

SOUTHEAST 877.780.4567 x703

FAX 866.620.7654 fl.returns@hydrofarm.com

Jate:		pa.retui
Store Name:		
Store Contact:	Custo	omer No:
Store Address:		Zip
Email:		
Phone No:	Fax No:	

For Fastest Possible Service:

- 1. Please verify that all products are under warranty.
- 2. Test all products prior to submitting form.
- 3. Fill out this form & email or FAX to your Hydrofarm Distribution Center (see info above).
- 4. Provide Invoice Number for proof that you purchased the item from Hydrofarm.
- 5. Please indicate your reason for returning the product on the lines below.

Quantity	Item Code	Reason for Return	Invoice Number	Tested: Yes	No
				V	
·					

- After we receive this form an RA confirmation will be emailed or faxed to you and must be included with return shipment
- ▶ All fields on form **MUST** be filled out completely
- Write the **RA NUMBER** on the outside of the box
- ▶ Shipping documents will be emailed or faxed

This form can also be accessed in pdf format on our website: www.hydrofarm.com

Please DO NOT use this form for ORDER SHORTAGES or DAMAGED MERCHANDISE. Contact your CSS for an invoice adjustment.

TO EXPEDITE YOUR RETURNS, LOG ON TO YOUR ACCOUNT AT HYDROFARM.COM AND ENTER YOUR RMA REQUEST ONLINE!