

Respirator & Powered Airshield Return Procedure

Important Notices:

DCA Deferrence Number /CCD Number

1. Respirators/powered airshields must be thoroughly decontaminated inside and outside by the customer.

2. DO NOT return used filters, headband pads and neck cape/chin seal. Yes, please provide me with replacement pads and neck/chin seal.

3. This form must be completed and accompanied by Safety Data Sheets (SDS) sheets for all hazardous materials to which this Respirator/Powered Airshield has been exposed.

4. This form and SDS sheets for all hazardous materials to which the respirator/powered airshield has been exposed must be attached externally to the packaging.

5. Customer must email your completed Return Authorization Request to Pureflosales@gentexcorp.com to obtain a returned goods/customer complaint number and include this number on this form.

6. Failure to decontaminate or failure to attached the required information externally to the packaging will result in the return of the respirators/powered airshield without any further action being taken by Gentex Corporation at the cost of the customer.

RGA Reference Number/CC					
Company Name:				-	
Contact Name:					
Address:					
Telephone:				_	
Fax:				_	
Email:				_	
Type of Business:					
Process in which the respire	ator/powered airshield is	used:			
Reason for return:		_			
Unit Serial Number:		_			
Distributor from whom was	s the unit purchased:	_			
Purchase Date:		-			
Was the product used in a	hazardous environment?	Yes No			
If the respirator/powered a	airshield was exposed to a	ny hazardous cor	taminants, please list a	all below:	
Contaminant Name:					
CAS Number:					
Trade Name:					
Contaminant Name:					
CAS Number:					
Trade Name:					
Provide and attach EX	TERNALLY SDS for all	hazardous ma	terials to which th	e unit has been	exposed.
*Indicated required information					chposed.

*Indicated required information necessary to initiate the return process

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