

## How to Complete the Warranty Claim Form

Fujitsu's Warranty Claim Form, shown below, must be submitted online through our Portal site. Follow the steps below to complete the form. All parts returned on an individual form must be from a single Model as purchased with the Distributor information in the second form section.

### General Information:

**Step 1: Model #** Click on the drop down menu of the Model Field and select and click on the model number.

**Step 2: Serial #** Type in Serial # of the unit, the unit's Install Date and Service Dates in the fields provided.

**Step 3: RGA/Debit Memo #** Type your RGA/Debit Memo # in the field provided. **Fujitsu does not give you this number.** You create your RGA/Debit Memo # for your own record keeping purpose.

**Step 4: Attaching a Debit Memo** If a PDF file of your debit memo is required, click on the RGA/Debit Memo PDF browse button, select your PDF file and click on the OPEN button for upload.

### Distributor Information:

**Step 5: Sold To / Returned From** Click on the drop down menus of the Sold To and Returned From fields and select your account.

### Contractor Information:

**Step 6: Enter Contractor Information** Type in the contractor's Company Name, Address, City, State, Zip and Phone.

### Parts Replaced:

**Step 7: Find the Part Being Returned** Click the Search button to find the part associated with the Model # selected in the first section. Click the Select button next to the correct part. This auto-populates the Parts Fields.

**Step 8: Find the Sales Order Number** Click on the Search button of the SO# field. On the SO list select the correct SO# related to your Purchase Order. This will auto-populate SO, Invoice, PO# and Price.

**Step 9: Entering Quantity Being Returned** Type the number in the Quantity field.

**Step 10: Choose Cause of Failure** Click on the drop down menu of the Cause of Failure field and select the reason the part failed.

**Step 11: Enter Return Shipping Method and Tracking** Select the return shipping method and type in your returning Tracking Number. It is required to provide the Compressor / Motor OEM# type.

**Step 12: Submit and Print Completed Form** Scroll down to the bottom of the page and click on the SUBMIT button. A Confirmation WCF number will be provided.

**FUJITSU**  
FUJITSU GENERAL AMERICA, INC.  
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### Warranty Claim Form

Use the form below to submit a Warranty Claim Form to FGAI. All fields in the first three sections are required. When completing the Parts replaced information, click the Search button to find the part associated with the Model # selected in the first section. All parts returned on an individual form must be from a single Model as purchased with the Distributor information in the second form section.

Please fill out the entire form before submitting. Incomplete forms will not be processed.

**Model #** -- Select Model --  
**Serial #**  
**Install Date**  
**Service Date**  
**RGA/ Debit Memo #**  
**RGA/ Debit Memo PDF**

**Distributor Information**  
**Sold To:** -- Select Sold To --  
**Returned From:** -- Select Returned From --

**Contractor Information**  
**Company Name**  
**Address**  
**City** **State/Province** -- Please Select -- **Country** USA  
**Zip** **Phone**

**Parts Replaced**

Part Number 1:	Description:	SO #:	Inv #:	PO #:	Unit Price:	Qty:	Cause of Failure:
<input type="button" value="SEARCH"/>					\$		
<input type="button" value="REMOVE"/>							
		<b>Shipping Carrier:</b>			<b>Tracking Number:</b>	<b>Compressor/Motor OEM#</b>	
		<input type="radio"/> UPS <input type="radio"/> Fed Ex <input type="radio"/> Other:					

Part Number 2:	Description:	SO #:	Inv #:	PO #:	Unit Price:	Qty:	Cause of Failure:
<input type="button" value="SEARCH"/>					\$		
<input type="button" value="REMOVE"/>							
		<b>Shipping Carrier:</b>			<b>Tracking Number:</b>	<b>Compressor/Motor OEM#</b>	
		<input type="radio"/> UPS <input type="radio"/> Fed Ex <input type="radio"/> Other:					

Part Number 3:	Description:	SO #:	Inv #:	PO #:	Unit Price:	Qty:	Cause of Failure:
<input type="button" value="SEARCH"/>					\$		
<input type="button" value="REMOVE"/>							
		<b>Shipping Carrier:</b>			<b>Tracking Number:</b>	<b>Compressor/Motor OEM#</b>	
		<input type="radio"/> UPS <input type="radio"/> Fed Ex <input type="radio"/> Other:					

Part Number 4:	Description:	SO #:	Inv #:	PO #:	Unit Price:	Qty:	Cause of Failure:
<input type="button" value="SEARCH"/>					\$		
<input type="button" value="REMOVE"/>							
		<b>Shipping Carrier:</b>			<b>Tracking Number:</b>	<b>Compressor/Motor OEM#</b>	
		<input type="radio"/> UPS <input type="radio"/> Fed Ex <input type="radio"/> Other:					

<b>Example One:</b> K:9701265015 <b>Shipping Carrier:</b> UPS	<b>Description:</b> POWER PCB ASY ASU12 <b>Tracking Number:</b> 123456789012345678	<b>Qty:</b> 1 n/a	<b>Cause of Failure:</b> No Power <b>Compressor/Motor OEM#</b>
<b>Example Two:</b> K:9364578002 <b>Shipping Carrier:</b> n/a	<b>Description:</b> COMPRESSOR ASSY 9CQ <b>Tracking Number:</b> n/a	<b>Qty:</b> 1 n/a	<b>Cause of Failure:</b> No Cooling <b>Compressor/Motor OEM#</b> PH26NSGT

Fill out the entire form before submitting. Incomplete forms will not be processed.

**IMPORTANT!**  
PRINT a copy of this completed form  
and attach it to the part being returned.