

## ROCSTOR **VIP** PROCEDURES:

- 1. The VIP Loaner unit will be sent out within 24 hours upon the issuance of the RMA number. Once you receive your Loaner unit you have 5 days to return your defective unit or the RMA number will expire and you will be invoiced for the Loaner unit.
- 2. All products must be returned freight prepaid. Or can be arranged to be picked up by Rocstor at the client's expense.
- 3. Once the defective unit is received by Rocstor, we will repair/replace within 24 to 48 hours and send the merchandise back to you free of charge via UPS Ground unless otherwise specified. (Additional charges may apply for expedited shipping) Please return the Loaner unit within 5 days upon receipt of your unit or you will be invoiced for the VIP Loaner unit.
- 4. Please send the units to:

ROCSTORAGE INC., 8130 Remmet Avenue, Canoga Park, CA 91304

- 5. It is important that units are returned via a carrier that provides a tracking number and confirmation of delivery such as UPS, FedEx, Airborne, etc; Rocstorage Inc. will NOT be responsible for lost or damaged packages.
- 6. The customer bears the cost of sending the defective and replacement units back to Rocstorage Inc., and Rocstorage Inc. bears the cost of shipping the defective units to the customer via UPS ground.
- 7. All products must be returned with an RMA number on the box. No Exceptions. A copy of valid proof of purchase must be included for all products. DO NOT SEND YOUR ORIGINALS.

I understand the terms and conditions of ROCSTOR VIP Exchange Program

Company	Name	
Date	Phone #	



## **CREDIT CARD AUTHORIZATION:**

Per your request, we will charge your credit card for your purchase order. In order to be able to process your order, please complete the form below and have the cardholder sign indicating permission for Rocstor to charge their credit card. Please return this form via fax (818) 884-8777 at your earliest convenience.

I, following cre	dit card(s)	authorize	Rocstorage, Inc., to charge the	
□Visa	☐ Master Card	☐ American Express	Discover	
Name on the	credit card:			
expiration da	piration date AVS # (Last 3-4 digits after the account # at the back of		after the account # at the back of the card)	
			\$	
in the amour	nt of: (please write in word	s)		
for purchasing the items: (Open Purchase Order / Invoice number)				
my shipping address is: (must be the same as the credit card billing address)				
credit card c	ompany telephone nui	mber (The 800 #)		
Authorized c	ard holder signature:			
Please conta	ct us at 818.449.200	00, if you have any question	ns. Thank you.	