



## RMA REQUEST FORM

Send To: Riffraff Diesel Inc.  
Attention: Returns  
PO Box 416  
Eagle Point, OR 97524

NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

INVOICE/ORDER #: \_\_\_\_\_

DATE OF ORDER: \_\_\_\_\_

PART #:

QUANTITY:

PART #:	QUANTITY:

REASON FOR RETURN: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IMPORTANT:** Please provide as much of the above information as possible to ensure the fastest response. Returns can be subject to a 20% restocking fee. All returning items need to have the Invoice/Order number on the outside of the box and be shipped to:

Riffraff Diesel Inc.  
Attention: Returns  
PO Box 416  
Eagle Point, OR 97524

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**Riffraff Diesel Inc.**  
**PERFECTING YOUR POWERSTROKE™**  
www.riffraffdiesel.com  
Main: 541.879.1052 | Fax: 541.588.8430