

# RMA

SUSPENSIONS.COM

*BT*  
*CH*



**PERSONAL INFORMATION:**

Name:	
Mailing Address:	
City:	
State / Zip:	
Home Phone Number:	
Work Phone Number:	

**SHIPPING INFORMATION  
(IF DIFFERENT FROM THE INFO ABOVE)**

Shipping Address:	
City:	
State / Zip:	

**SERVICES NEEDED: ie: Revalve, Service, Springs, etc...**

last service date:
Serviced by:

**RIDER INFORMATION:**

Brand:	
Model/Size:	
Model Year:	
Rider Weight In Street Clothes:	
Rider Height:	
Type of Riding:	
Ability/Rider Classification:	