

**XANTREX ENERGY CLUB  
DEALER REMOVAL/REINSTALLATION  
FEE CLAIM FORM**

Dealer Name	
Address to appear on check	
Dealer Phone Number	
Xantrex RMA number	
Xantrex Product	
Xantrex Serial Number	

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

Removal/reinstallation claim requirements:

1. Dealer must be a Xantrex Energy Club member in good standing at the time the Return Material Authorization was issued by Xantrex
2. Xantrex approved the return and issued a Xantrex Return Material Authorization Number prior to dealer return shipment
3. Dealer sent back defective unit to Xantrex and the unit has been received by Xantrex Technology Inc.
4. The re/re fee is only applicable on warrantable failures as determined by Xantrex Technology Inc.
5. The re/re fee is only applicable on proper installation of North American models of GT Series inverters.

**FAX: 604 422 2756 ATTN: CUSTOMER SERVICE**  
**MAIL: XANTREX TECHNOLOGY INC.**  
**ATTN: CUSTOMER SERVICE PROGRAMS**  
**DEALER CLAIM REIMBURSEMENT**  
**8999 NELSON WAY**  
**BURNABY BC CANADA**  
**V5A 4B5**

Please note: **Please allow 45 days for claims processing and reimbursement.**  
Reimbursement program terms and conditions subject to change without notice.  
Reimbursement program subject to cancellation without notice. Reimbursement is at the sole discretion of Xantrex Technology.