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**Title:** Customer Return Container Condition Form

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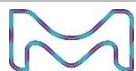
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Form
AUTHORING SITE: PM-Haverhill
AFFECTED SITES:
TITLE: Customer Return Container Condition Form

Electronic Signatures

Signed by	Meaning of Signature	Server Date (dd-MMM-yyyy HH:mm z)
Gilbert Geoffrey M239620	Management Approval	22-Apr-2021 21:25 CEST
Muscat Daniel M249807	Management Approval	23-Apr-2021 21:02 CEST
Christopher Seth M292852	Quality Approval	23-Apr-2021 21:52 CEST



## Customer Return Container Condition Form

Per SOP# 20295313

**Instructions:** This form is to be completed in its entirety and provided with each container being returned to EMD *Electronics* (EMD *EL*). Information on this form does not represent an order; it is used to ensure the container is associated with an order already placed with EMD *Electronics*. The form is to be signed by the person preparing the form. For assistance please call customer service at: 1-978-374-5200. [See our website for details on safe closure and packaging instructions: www.emdgroup.com/en/expertise/semiconductors/services/container-return.html](http://www.emdgroup.com/en/expertise/semiconductors/services/container-return.html)

**Note:** All returns to EMD *Electronics* shall meet the United States Department of Transportation (U.S.D.O.T.) shipping requirements and the requirements of the EMD *Electronics* Customer Returns Policy and Procedure. Items that do not meet these requirements may be subject to the following: return at the expense of the customer, removal from EMD *Electronics* customer database, hazardous condition processing fee, and notice of violation from U.S.D.O.T.

Customer Name and Address:		Contact Name:	Position/Title:
		Contact Phone:	Date:
Returning to: (check) <input type="checkbox"/> EMD <i>EL</i> Haverhill Site, 1429 Hilldale Avenue, Haverhill, MA 01832 <input type="checkbox"/> EMD <i>EL</i> Sheboygan Site, 5485 County Road V, Sheboygan Falls, WI 53085			
Reason for return: (check) <input type="checkbox"/> Non-conformance <input type="checkbox"/> Refill <input type="checkbox"/> Analysis <input type="checkbox"/> Other (please specify):			

### Check boxes below to confirm the safe container condition for return:

- Container is: ☐ Under Inert Gas (Check to indicate type: ☐ Argon ☐ Helium ☐ Nitrogen)  
☐ Under Vacuum ☐ Under Hydrogen
- ☐ *GHS* compliant chemical labels are in place on the container(s) stating material contents.
- ☐ All ports on the container are securely capped per "*Closure Instructions for Container Valves and Fittings*".
- ☐ All valves on the container are closed per "*Closure Instructions for Container Valves and Fittings*".
- ☐ There are no residual materials or free liquids on the outside of the container, no odors, leaks, or stains on container.

### Provide the following detail if the returned container is not chemical free.

Container serial number	RMA #	EMD <i>EL</i> Product	Quantity of Product	Container Style	Comments regarding container (alterations or other problems)

### Provide the following detail for what is intended for the container.

Need to be High Purity Cleaned by EMD <i>EL</i>	Product to be filled	Quantity	Purchase Order	Comments

### By signing below, I am confirming the information provided on this form to be accurate:

Printed Name:	Signature:	Date

### FOR EMD *Electronics* USE ONLY

Container serial number	Initial & Date	Leak check	Ports Clean	Received Weight	Comments
		Inbound:			
		Outbound:		Scale #:	

## APPROVAL

Review, approvals and signatures for this document will be generated electronically using the EDMS. Print a « CONTROLLED » copy if a hardcopy with signature verification is required.

## REVISION HISTORY

The latest effective version content is written in black, standard letters (Verdana, 9 pt.). *Changes to the previous effective version content are written in blue, italic letters.* A complete document history is available in the EDMS. A summary of revision changes is tabulated below.

Revision #	Description of change
4.0	<ul style="list-style-type: none"><li><i>Changed from EMD Performance Materials (EMD PM) with EMD Electronics (EMD EL).</i></li><li><i>Referenced returns website, and “Closure Instructions for Container Valves and Fittings” document which is posted on the website</i></li><li><i>Added details for safe return – container headspace atmosphere</i></li><li><i>Changed OSHA to GHS</i></li></ul>
3.0	<ul style="list-style-type: none"><li>Changed from Mango folder path PM-Haverhill/Procedural Doc/Form/QA/SAFC Hitech to PM-Haverhill/Procedural Doc/Form/EHSS</li><li>Changed title from 44072_Customer Return Container Condition Form to just Customer Return Container Condition Form</li></ul>
2.0	<ul style="list-style-type: none"><li>Changed all references of SAFC to EMD Performance Materials/EMD PM.</li><li>Added full address in the “returning to” section.</li><li>Removed rows that said “Example”</li></ul>
1.0	<ul style="list-style-type: none"><li>Edoc PROC-HTC-FORM-044072 converted to Mango Doc ID 20295000</li></ul>