



Solutions for Transfer and Care

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Reject Advice Note (RAN)

Customer _____ Supplier: _____ RAN: _____

Part No. : _____ Description: _____ Issue No. : _____

Serial No.(s): _____ Qty: _____ Date Returned: ____/____/____

Description of Problem: *Please include any relevant information on the condition of the unit when received.*

Name: _____

Date: ____/____/____

Engineer Investigation Report: *Please ensure precise information is provided.*

Name: _____

Date: ____/____/____