

WiseEye SmartCam Return Authorization Form

RMA # _____

Name:

Address

Street:

City:

State / Province:

Postal Code:

Email Address:

Daytime Phone:

Camera Model: (circle one) SmartCam / MiniCam

Camera Cell Provider: (circle one) Verizon AT&T

IMEI Number:

Purchase Date:

Purchase Place:

Brief explanation of issues with your camera:

Send the completed form and all returns to:

WiseEye Technologies, LLC
ATTN: Warranty and Returns
2191-A Tower St
Denham Springs, LA 70726