ACDelco Return Parts Application (PC355)

Date:

Please check your Administrative PDC

☐ Memphis PDC 92

Six Digit ACDelco Account Number _____

_____
(ACDelco Distributor Account Name)

_____
(Address)

_____
(City, State and Zip Code)

Customer Control Number _____

MAXIMUM 5 NUMERIC DIGITS

Reason For Return
Check the box indicating reason for return. Do not check more than one box per return application

- ☐ Semi-Annual Return (01)
- ☐ Termination Return (02)
- ☐ Improperly Boxed (03)
- ☐ Concealed Damage (06)
- ☐ New Defective (07)
- ☐ Special Product Returns (12)
- ☐ Duplicate Order – Customer Input (19)
  Invoice Number _____
  Invoice Date _____
- ☐ Supersession Return (21)
- ☐ Semi-Annual Return Spoils (25)*
- ☐ Other _____

☐ Please check if computer generated listing of parts to be returned is attached and properly identified (see instructions on reverse side of form).

Instructions - By Return Type
APPLICATION REQUIRED FOR ALL RETURN TYPES

Return Types 01, 02, 19, 21 and 25:

1. Prepare original PC355
2. Mail original to regional sales office for approval
3. When approved, regional sales office will mail original to PDC
4. **No returns are to be made prior to receiving the Material Return Authorization Document and material return tags from the PDC**

Return Types 03, 06, 07 and 12:

1. Prepare original PC355
2.. Send original PC355 to your Administrative PDC for processing
3. PDC will mail Material Return Authorization Document and material return tags
4. **No returns are to be made prior to receiving the Material Return Authorization Document and material return tags from the PDC**

Quantity	Part Number (Use Original – Not Superseding No.)	Comment	Price Each	Extension
			Page Total	
			Grand Total	

For ACDelco Regional Sales Office Use – Approval Required on Return Types 01, 02, 19, 21 and 25

Approved By: _____ **Region:** _____ **Date:** _____