



RETURN FORM - NON-CONFORMING OR DEFECTIVE PRODUCT RETURN

Please write in block letters and fill in all the fields – add as much detail as possible

Once complete add this form, the return items and packing slip to your return envelope.

Return address:

Lamark LTD
PO. Box 239
Newtownabbey
BT36 9ER

YOUR INFORMATION

First and last name:	
Address:	
Phone number:	
E-mail:	

YOUR ORDER'S DATA

Order Number:	
Return Code*:	
Reason for the withdrawal (optional):	
Notes (optional):	

RETURNED PRODUCT	Detailed description of the defect/non-compliance

Date and place / / ,

customer's signature _____

IMPORTANT

We remind you that any non-conformities or defects of the purchased product must be reported within the terms set forth in the Conditions of Sale which you accepted at the time of purchase, in which the rights to which you are entitled against the verification of the non-conformity and the defect are also indicated.

- a) this form correctly filled in;
- b) all photographic documentation supporting the dispute;
- c) confirmation of the order transmitted by the Seller and/or receipt.