

# RETURNS FORM

Return to: **Euromarc Distribution Centre**  
**177 Montgomerie Road**  
**Mangere**  
**Auckland 2022**

If your purchase arrived and for some reason was not satisfactory, please complete and return this form with the product/s and purchase paperwork. This will assist us in correcting the situation quickly. Returns will be accepted up to 10 days from the date of delivery. If the product/s are damaged or faulty please return them ASAP and within 48 hours. Any product returned must be unused and in the original condition, and is subject to our Terms & Conditions and Returns Policy which can be viewed on the website.

**PLEASE PROVIDE AS MUCH INFORMATION AS POSSIBLE TO HELP US PROCESS YOUR RETURN QUICKLY**

TODAY'S DATE ...../...../.....  
ORDER NUMBER .....  
YOUR NAME .....  
PHONE NUMBER .....  
EMAIL ADDRESS .....

**METHOD OF PAYMENT**  
How did your originally pay for order?

- CREDIT CARD  
 CHEQUE  
 DIRECT BANK CREDIT

**DESIRED RESOLUTION**  
How would you like to proceed?

- EXCHANGE  
 REFUND  
 WARRANTY

Please note, the resolution will sometimes depend on the circumstances of the return, and we cannot guarantee that the desired resolution will be applicable in each instance.

**RETURNED PRODUCT**

PRODUCT CODE	DESCRIPTION	QTY	PRICE EACH	PRICE TOTAL
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

**REASON FOR RETURN (tick one)**

- Product/s damaged in transit  
 Product/s not suitable for application Product/s not satisfactory  
 Product/s are faulty  
 Product/s incorrect

**ADDITIONAL DETAILS / EXPLANATION**

.....  
.....  
.....

**PRODUCT EXCHANGE** If you wish to exchange a product, please state the new product/s you wish to order.

PRODUCT CODE	DESCRIPTION	QTY	PRICE EACH	PRICE TOTAL
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

**REFUNDS** Any refunds will be made straight back to you in the same way as we received your payment initially.

**BANK ACCOUNT DETAILS**

(where original payment was made by direct bank credit)

ACCOUNT NUMBER

ACCOUNT NAME .....

**CREDIT CARD DETAILS**

(where original payment was made by credit card)

CREDIT CARD TYPE ..... EXPIRY DATE ...../...../.....

CARD NUMBER

NAME ON CARD .....