

Returns Form



Date: ___/___/___

Dear Customer,

We kindly ask you to keep this form for the duration of your 12 month warranty. This form must be completed **including your order ID**. We will need this in order for us to process your return quickly and efficiently. Warranty on any item starts from the date of the receipt.

To ensure that we can log and file these correctly a copy of this returns form will need to be emailed to warranty@spapartsvortex.eu and a copy will need to be sent (in the box with the product) back to us.

Your Name Your Contact Number Your Email Address

Fault codes:

A - Damaged on delivery **B - Faulty goods** **C - Wrong parts received** **D - Wrong parts ordered**

	Order ID	Qty.	Serial No./ Product SKU	Fault Code	Cause - description
1					
2					
3					
4					
5					

Shortage Claims:

- Claims made up to 7 days after purchase a full refund will be offered.
- Claims made up to 30 days after purchase credit will be offered.
- Claims made after 30 days credit will be offered, however a 20% restocking fee will be charged.
- Claims made after 90 days will be rejected.
- **All products need to be sent back unused and re-sellable.** days of delivery

Warranty Claims:

- Electrical: 15 months
- Other: 12 months

Damage Claims:

- Claim must be made within 7 days of delivery

Please tick the relevant box for your claim.

- This item has been returned for a warranty replacement
- Replacement already purchased, the new order ID is _____ . Internally credit this order Item sent back within 7 days of purchase - refund to card/PayPal

Customer Signature _____

(by signing you agree to our terms and conditions - view them all here: spapartsvortex.eu/terms-and-conditions)

Return products to:
 FAO Returns Department, Unit 7, Pioneer Park, Voyager Park South, Portfield Road, Portsmouth, PO3 5GF

For official use only

Product to be tested Yes / No Credit

Product tested Yes / No Refund

Outcome of test: _____ Replace