Returns Form



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Date	e://					VURIEN		
Dear We k	r Customer, kindly ask you to ke	our orde	er ID . We will nee	ed this in	order for us to	varranty. This form must be process your return quickly and		
		_	•			form will need to be emailed to with the product) back to us.		
<u>Your</u>	Name		Your Contact Number			Your Email Address		
	t codes: Damaged on delive	ery B	- Faulty goods	1	/rong parts rece	eived D - Wrong parts ordered		
	Order ID	Qty.	Serial No./ Product SKU	Fault Code	Cause - descr	ription		
1				 				
3				+				
4		+		+				
5								
• Cla • Cla • Cla res • Cla • All	tage Claims: aims made up to 7 of aims made up to 30 aims made after 30 stocking fee will be aims made after 90 products need to	0 days af 0 days cre 1 charged 1 days wi 10 be sen	fter purchase crededit will be offered it. ill be rejected. it back unused a	dit will be d, howe\	e offered. ver a 20%	Warranty Claims: • Electrical: 15 months • Other: 12 months Damage Claims: • Claim must be made within 7 days of delivery		
Pleas	se tick the relevant	t box for	your claim.					
This	item has been retu	urned for	· a warranty repla	cement				
						Internally credit this order		
Item	sent back within 7	days of	purchase - refund	d to card	J/PayPal	L		
Customer Signature (by signing you agree to our terms and condition them all here: spapartsvortex.eu/terms-and-condition								
FAG	turn products to: O Returns Departm 3 5GF	nent, Uni	it 7, Pioneer Park	, Voyag	er Park South, l	Portfield Road, Portsmouth,		
	or official use on	•	e / No			Credit □		

For official use only			
Product to be tested	Yes / No	Credit	
Product tested	Yes / No	Refund	
Outcome of test:		Replace	