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| **Always complete this area – basis for return confirmation** |
| Customer no: | Telephone no: |
| Customer name: | Cellphone no: |
| Telefax no: |
| Customer ref: | E-mail: |
| Address: |
|  |
| Reason for return / complaint |
| Complaint ( ) | Incorrect order ( ) | Return after trial ( ) |  |
| Other reason: |
|  |  |  |  |  |
| Art. No. | Serial no\* | Description | Qty. | Delivery date | Your order no. | Our order no. |
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| \* If serial no. present. If complaint refers to accessories or individual components please give serial no. of the main product. |
| **Regarding complaints** |
| When did the fault occur? | How many times has the product been circulated? |
| Describe the nature of the fault, how it occurred, and the circumstances under which it occurred, e.g. user’s weight, ambient conditions. |
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Returns/complaints will only be accepted on condition that: If you have questions, contact customer services:

1. the form is correctly completed and send to customer services Etac Sverige AB, Customer service
2. a copy of the form is sent with the returned article Tel +46 371 58 73 30
3. a return no. is obtained as stated above (contact customer services) Telefax +46 371 58 73 90

 E-mail: info@etac.se

Product return address: Etac Central Warehouse, Oljevägen 3, SE-334 33 Anderstorp, Sweden