

NOTE: all fields must be filled out

COMPANY DETAILS

Company Name:

Contact Person:

Contact Number:

Contact email address:

DESCRIPTION OF GOODS TO BE RETURNED

The Zanda invoice number or your order number must be supplied.

Zanda Invoice Number

Customer Order Number

or

Date of Order

Items being returned

QTY	ZANDA CODE	DESCRIPTION

REASON FOR RETURN

Faulty or Damaged Goods

No Restocking charge. Freight by Zanda.

Change of Mind

Other - please specify

Incorrect Packing

No Restocking charge. Freight by Zanda.

Incorrectly ordered

Incorrect Invoicing

No Restocking charge. Freight by Zanda.

No longer Required

GOODS RETURN CHECKLIST (all boxes must be ticked)

Is the Invoice date within 14 days of today's date?

Have you accepted the 20% restocking fee? (Does not apply if Zanda is at fault)

Are all the required Fields filled out in this form?

Will the goods listed be freighted to Zanda at your cost? (Does not apply if Zanda is at fault)

Are the goods in their original, undamaged packaging?

Have you contacted Zanda for authority to return?