



Application For Returns Authorisation

email: returns@vesamount.co.uk • web: www.vesamount.co.uk • fax: 01484 716642

IMPORTANT : Please ensure that all information is supplied. If any part is not correctly completed delays WILL occur when arranging a credit for any faulty items. Goods cannot be returned without a returns authorisation number. This form is not authorisation for the return of a product but is required so a returns authorisation number can be issued. The invoice number must be quoted in all cases. If an invoice number has not been received for the faulty goods an order number must be used instead. If the invoice number or order number is not provided a handling charge will be imposed.

PLEASE NOTE : The current version of this form may be downloaded from the Vesa Mount website at the following address: www.vesamount.co.uk

Company Name Contact: TEL No. : FAX No. :

Company Address Account No. (if applicable)

Part No.	Item Description	Qty	Serial No.*	Description of Fault	Invoice/Order No.

OFFICE USE ONLY

RETURNS AUTHORISATION NUMBER :

PLEASE PRINT THIS NUMBER CLEARLY ON THE OUTSIDE OF THE PACKAGING AND INCLUDE THIS PAPERWORK WITH THE GOODS

Comment: _____

Return Authorised By : _____ Date : _____

*NOTE : If returning a large quantity of goods with serial numbers, please list the numbers separately on a piece of paper with your address and send with this form for the attention of the Returns Department.