SPA-ES

RETURNS FORM

Dear Customer,

To allow us to handle your return as quickly and efficiently as possible, please complete the form below and send by email to us at: info@spa-es.es together with a copy of the original invoice.
Warranty on any item starts from the date of receipt.
Claims will not be handled without this paperwork and a copy of the original Invoice.

DATE:

YOUR NAME YOUR CONTACT NUMBER

	ARTICLE NUMBER	QUANTITY	SERIAL NUMBER PRODUCT CODE	YOUR REF.	FAULT CODE	CAUSE - DESCRIPTION
1						
2						
3						
4						
5						

ALL SHORTAGE CLAIMS SHOULD REPORTED WITHIN THREE WORKING DAYS OF RECIEPT.

PLEASE KEEP THIS FOR THE DURATION OF YOUR WARRANTY PERIOD

FAULT CODES:

A - Damaged on Delivery
B - Faulty Goods
C - Wrong Parts Received
D - Delivery Shortage
E - Wrong Parts Ordered

Please tick the box relevant to your claim:

This item has been returned for warranty replacement ☐

I have already bought a replacement on Order No.

Item sent back for crediting. ☐

Kind Regards

Bill Norris - **SPA-ES**

Send by email