

Model form for return shipment**Postal address**

Aero-Sense BVBA
Delaerestraat 41
8800 Roeselare
Belgium

Return address

Aero-Sense BVBA
Kachtemsestraat 289
8800 Roeselare
Belgium

My details

Name

Street + House number

Postal code + town/city

Country

Telephone number

E-mail address

IBAN number

BIC / SWIFT

I hereby inform you that I wish to revoke our agreement regarding the sale of the following goods.

Details of the return shipment

Order number

Order date

Invoice number

Returned item(s)

Quantity	Article number Aero-Sense	Product description	Product packaging	Amount (€)
Total				

Additional information of the return

- Delivery of wrong product

Additional information:

- Damage

Additional information:

- Other reason

Additional information:

Date: / /

Signature