

# Return order

Please fill in



Company .....  
Name .....  
Customer No. ....  
Street .....  
Postcode | Place .....  
Tax ID No. ....  
Tel. ....  
Fax .....  
Email .....

**Free fax number:**  
**EU 00 800-63 43 29 24**

**Email:**  
**sales@oeg.net**

Please fill in the form below to allow us to return the goods and send the completed document back to our free fax number (see above).

We will then immediately proceed to make arrangements for the collection of the goods at your location. Please take note that a return of the goods is only possible if you have filled in the form completely.

Original delivery note or invoice number: .....

We would like to return the following items:

OEG Art. No.	Quantity	Reason for return

Error description (for faulty goods):

.....

Return by

Parcel service      Forwarding agency

The goods are well-packed and ready for collection.

A copy of the original invoice or the delivery note is enclosed in the package.

Number of packed items: .....

In case of return by forwarding agency:

Dimensions of shipment incl. pallet: ..... x ..... x ..... (Length x Width x Height in cm)

**Please note that the goods require a packaging and that the package label may not be attached to the original package directly. To simplify the return, please use the original outer package of OEG if possible.**

**The package label will be brought by the collecting carrier.**

**Goods returns are accepted only within 14 days after delivery date.**

**Special orders (3-digit article numbers) are excluded from right of return.**

Date: .....

Signature: .....