

Returns form

To:
Erwin Kowsky GmbH & Co KG
Complaint department
Oderstrase 73
24539 Neumunster

Tel.: +49 (0) 4321/9957-0
Fax: +49 (0) 4321/9957-57

Note: Please fill out completely and readably. Thank you.

Kowsky customer number: _____
Customer name: _____
Branch office: _____
Contact person: _____
E-Mail address: _____
Telephone number: _____
Order number and date: _____
Article number: _____

Reason for the return of goods, please tick:

(please note our return goods deadlines in this respect)

- The wrong article was ordered.
- The wrong article was delivered: _____
(What should have been delivered?)
- The delivered article is defective (short description of what is defective, respectively what happened): _____

Value of the goods: _____

Please note: we charge a fee of 20% of the goods value for the restocking of incorrectly ordered goods.

Checklist for your goods return shipment:

- Completed goods return form
- Copy of the delivery note

Signature: _____

Date: _____

**We are unfortunately not able to process the return shipment without the returns form.
We request your understanding for this.**