RETURN REQUEST FOR WORN-OUT PARTS

(Please attach this document to returned items)

Data Y Y Y Y – M M – D D

Company name	Customer's №
stamp	

1. PRODUCTS TO BE RETURNED

№	Polcar №	Quantity	Invoice №	Date of purchase
1				Y Y Y Y – M M – D D
2				Y Y Y Y – M M – D D
3				Y Y Y Y – M M – D D
4				Y Y Y Y – M M – D D
5				Y Y Y Y – M M – D D
6				Y Y Y Y – M M – D D

Please attach this document to returned items. If form is missing or filled up incorrectly, we reserve the right to refuse return of deposit.

2. REMARKS

Please attach this document to returned items.

Conditions for acceptance of worn-out parts may be found at www.polcar.com (Terms of Sales).

Person Responsible (Name and Surname)	Contact phone number