Returns form

Please complete all sections in BLOCK CAPITALS

This form should be used for **ALL RETURNS** including faulty goods, damaged goods and change of mind policy returns.

Please send this completed form together with your items for return to:
Ventilation Centre, RETURNS, Unit E Venture Business Park, Witty Street, Hull HU3 4TT

Order details

Customer name	
Address	
Post code	
Invoice no.	
Date order was delivered	

Items returned

Code	Description	Quantity	Reason for return

Items which are returned under change of mind policy must be in their original unused condition with undamaged packaging.
As it is your responsibility to ensure the goods reach us in a re-saleable condition, we would advise you to package the items securely and take out necessary insurance cover. Ventilation Centre reserve the right to refuse any refund if the returned goods do not meet these conditions.