

RETURN APPLICATION FORM

grandOptical

Date of filling in the return form

CUSTOMER DATA

Name and Surname

IBAN for money return

Address

Bank name

E-mail address

Beneficiary name

Order number

Proof of purchase/ Receipt number

Mobile phone number

Proof of purchase/ Receipt date of issue

Please mark how did you pay for your order:

Cash PayPal Bank deposit Card

Whether you are going to send the product back to the warehouse or return the product to the store, the reverse payment will be done the same way that the purchase was paid (bank deposit, card, PayPal). The only exception is for payments with cash on delivery, for which the reverse payment will be done with bank deposit.

Code of the returned product

Quantity of the returned products

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Please mark the reason of return:

- The product doesn't match my expectations
- The product is too small
- The product is too big
- Wrong product delivery – please contact our customer service to order a courier on our cost to pick up the product from you
- The product is damaged – PLEASE DESCRIBE THE ISSUE BELOW.
In case you want to submit a claim, please contact our customer service that will order a courier to pick up the product from you

Please add a proof of purchase to this form.

Customer's signature