



GOODS RETURN FORM

DATE:		ORDER REFERENCE:	
CUSTOMER NAME:		CUSTOMER TELEPHONE NUMBER:	
CUSTOMER ADDRESS:			

ITEM	QUANTITY	REASON FOR RETURN

CUSTOMER SIGNATURE:	
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**RETURN ADDRESS:
SNH
UNIT 1
NETHERHALE FARM ROAD
ST NICHOLAS-AT-WADE
KENT CT7 0LX**

NOTES:

- 1 Please return any item to SNH for a refund but this **MUST** be within our 28 day return's policy.
- 2 Please complete and send this form along with your return - any returns received without this paperwork will not be processed.
- 3 **YOU** shall be responsible for the cost of returning the goods for refund - except in cases of wrongly supplied goods.
- 4 SNH recommends that you use recorded delivery or courier for larger items to ensure your return will be insured against any damages.
- 5 Please pack all returns with original packaging as returns will only be accepted in a re-saleable condition.