



# RETURN OF PRODUCT

Date: \_\_\_\_\_

<b>Company Name:</b> _____	<b>Order name/number:</b> _____
<b>Ship to:</b> _____	<b>TWC order number:</b> _____
_____	_____

## PRODUCT TYPE

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Rollers          | <input type="checkbox"/> Honeycell      | <input type="checkbox"/> Other (Please specify) |
| <input type="checkbox"/> Awnings          | <input type="checkbox"/> Shutters       | <input type="text"/>                            |
| <input type="checkbox"/> Romans           | <input type="checkbox"/> Alum Venetians |   |
| <input type="checkbox"/> Timber Venetians | <input type="checkbox"/> Verticals      |   |

## Quantity:

No. of Parcels:

Total No. of Items:

## INFORMATION

Reason for Return? \*

Instructions / Details / Repair Information \*

## WHO IS AT FAULT?

- Customer Error     TWC Error     Charge     No Charge

**i** *Return Dockets will only be issued after this form has been fully completed. Once issued, kindly attach a copy of the Return Docket to each parcel being returned, ensuring that the barcode is flat and visible for scanning.*

*Returned goods will only be accepted with prior authorization from TWC. TWC will not be liable for any damaged goods due to poor packaging.*

\* Required Information