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|  | ***Brink Towing Systems*** |
| **CUSTOMER RETURNS** BUK225 | |
|  | |
| ***REFERENCE No:***   |  | | --- | |  |   ***DATE:***   |  | | --- | |  |   ***COMPLETED BY:***   |  | | --- | |  |     ***COLLECTION ADDRESS: PLEASE TICK RELEVANT BOX:***   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | NAME: |  |  | CUSTOMER NO SHOW/NO LONGER WANTS PRODUCT |  |  |  | | ADDRESS: |  | DAMAGED AS RECEIVED |  |  | |  |  | MISSING PARTS |  |  | |  | INCORRECT PRODUCT/PARTS |  |  | |  | FAULTY/INOPERATIVE |  |  | | POST CODE: | POOR APPEARANCE, CORROSION, PAINTWORK etc. |  |  | | TELEPHONE: |  | OTHER *please specify* |  |  | |     ***PRODUCT DETAILS:***   |  |  | | --- | --- | | PART No: |  | | PART DESCRIPTION: |  | | VEHICLE MAKE/MODEL & REG. |  | | QUANTITY: |  | | SERIAL No: |  | | INVOICE No: |  | | CONFIRMATION No: |  | | REASON FOR RETURN:  *(Please tick above box & give brief description of reason for returning product)* |  | | PRODUCT BEEN FITTED: |  | | |
|  | |
| ***TRANSPORT DETAILS:***   |  |  | | --- | --- | | COURIER: |  | | CONSIGNMENT No: |  | | DATE: |  | | |  |  | | --- | --- | | ***QOL No.*** |  | | |  |  | | --- | | *Please completed all fields & return to the postal/email address below.*  ***BRINK TOWING SYSTEMS*** *is dedicated to providing the customer with a Quality product/Service.*  *We have been accredited with* ***TS16949*** *as a result of this.*  *The information you provide can help us resolve any problems which may occur to enable us to remain customer focused & carry on supplying a Quality Product/Service* |   BRINK TOWING SYSTEMS LTD  UNIT 7 CENTROVELL IND. EST.  CALDWELL ROAD  NUNEATON  WARWICKSHIRE  CV11 4NG  ENGLAND  Tel: 02476 355810  Email: *towiinguk@brink.eu* | |