RETURN AUTHORISATION FORM

M	uha	M
♦ C	orpord	ıte

		DATE	/	/	
STORE NAME:	STORE CODE:				
CONTACT NAME:			OFFICE USE ONLY:		
PHONE NO.:				CHECKED BY: SIGN:	
HOW LONG HAVE YOU HAD THE GARMENT FOR? (please provide approx. time): REASON FOR RETURN (Please choose an option):					
INCORRECT SIZE INCORRECT STYLE/COLOUR FAULTY/DIRTY OTHER (please state reasoning):			DATE RECEIVED: APPROVED:		
R.A. NUMBER (COMPULS					
(PLEASE CALL MUHAN CORPORATE ON 1300 700 056 TO OBTAIN AN R.A. NUMBER)					
STYLE CODE	DESCRIPTION	COLOUR	SIZE	TOTAL QTY	

RETURNS POLICY

RETURNS PROCEDURE:

STEP 1: COMPLETE THIS FORM

STEP 2: PHONE: 1300 700 056 TO OBTAIN AN R.A. NUMBER

STEP 3: PLEASE RETURN THIS FORM ALONG WITH GARMENTS TO THE FOLLOWING ADDRESS:

MUHAN CORPORATE PO BOX 6790 SILVERWATER NSW N.S.W 1811

STEP 4: PLACE AN ORDER FOR REPLACEMENT GARMENTS IF NEEDED. VIA ONE OF THE FOLLOWING METHODS:

Fax: (02) 9649 4125 Email: sales@muhancorporate.com.au Online: www.muhancorporate.com.au

TERMS & CONDITIONS:

All returns must be in 'as new' condition. All returns must be made within 30 days from receipt of goods and accompanied by this returns form (available for download from our webpage) detailing an invoice number and clearly stated reason for return and action required.

When sending back your returns, please make sure a proof of delivery is obtained. All non-stock and embroidered garments are non-returnable. Freight costs will be borne by the customer, except in cases where the return is based on quality issues, whereby our nominated courier is to be used. You are required to re-order the replacement garment. Any orders sent with returns will be overseen and not processed.

Should you require further details please call 1300 700 056 between 9.00am - 5.00pm Monday to Friday.