

Returns Advice Form



Please include this form along with your returns and send to:
Returns Department, DD, 6 Perry Way, Witham, Essex, CM8 3SX.

This returns form is required to be completed in full. Failure to do so will result in no credit.

- Returns cannot be accepted without prior authorisation per item.
- Goods need to arrive back to us in a re-saleable condition and in the original packaging.
- Medicinal Products, Whitening and Cold Chain Products are deemed NON RETURNABLE.
- All returns must be received back to our warehouse within 28 days of Invoice.

CASE NO.

CUSTOMER CODE	ACCOUNT HOLDERS FULL NAME	ADDRESS
		Postcode

PRODUCT CODE	QUANTITY	DESCRIPTION	INVOICE NUMBER

SUPPORTING INFORMATION

Please ensure that all accessories are returned alongside items for repair.

CONTAMINATED GOODS

Please note that it is illegal to send contaminated goods through the post.
Please ensure all contaminated items are sterilised before return and the following section is completed to confirm this:

In accordance with the manufacturer's instructions, the enclosed product has been sterilised by:

- Autoclave Dry Heat Cold Sterilisation

State type of cold steriliser/disinfectant used here:

Name _____ Signed _____ Date _____