

# GOODS RETURN FORM

**Providers Name:**

Monash Electric Motors Pty Ltd T/A BCB Sales & Service (Vic)

ABN 67 079 036 632

**Providers Address:**

F1-2 / 73 Main Road, Clayton South VIC 3169

**Client:**

.....

**Contact No:**

.....

**Address:**

.....

.....

**Description of Goods / Part Number:**

.....

.....

.....

**Invoice / Receipt Number:**

.....

**Reason for Returning Goods**

.....

.....

.....

**Date of purchase:**

.....

.....

.....

.....

.....

I hereby declare that the information provided above is true and correct and to the best of my knowledge and belief and I have complied with all the conditions of the warranty.

Signed: .....

Name (please print): .....

Dated: .....

[Please note, the issue or completion of this form by the Client does not constitute an admission of liability by BCB]