



Returns Form (Please tick relevant boxes)

1. What would you like to do?

- Exchange
 Refund

2. Reason for exchange/Refund?

- Item is wrong size
 Items is faulty
 Item is not what I ordered
 Other (Please give details below)
-

3. Item(s) being returned

| Part Number | Description | Size | Quantity |
|-------------|-------------|------|----------|
| | | | |
| | | | |

4. If you want an exchange, what new item(s) would you like?

| Part Number | Description | Size | Quantity |
|-------------|-------------|------|----------|
| | | | |
| | | | |

5. Billing Address

| | |
|-------------------|--|
| Name | |
| Address | |
| | |
| | |
| Post Code | |
| Contact Number | |
| Email | |
| Customer A/C | |
| Order/Invoice No. | |

Pack up your item(s) you want to return with this form and send by recorded delivery to;

Marine Super Store Ltd, 7-11 The Slipway, Port Solent, Portsmouth, Hampshire, PO6 4TR