

Withdrawal Form – Return Application

(complete and send this form only if you want to renounce your purchase)

Date: _____

Name of the Seller:

SIA „STAARTER”

Phone Number of the Seller:

+371 6610 2512

Address of the Seller:

Elizabetes Street 39 - 20, Riga, LV-1010, Latvia

E-mail of the Seller:

return@designscan.eu

Customer's Name, Surname:

Customer's Address:

Item:

Item Purchase Date:

Date of Receiving Item:

Item Purchase Receipt Number:

Customer's Statement of Withdrawal:

Hereby I state that I want to renounce agreement about item purchase that I have previously signed.

Customer's Signature: _____

(signature is not mandatory if you use withdrawal submit form on www.designscan.eu website)

Please send completed withdrawal form with a copy of purchase receipt by post or e-mail to SIA "STAARTER" address or e-mail stated above or upload completed form on the website www.designscan.eu.

After we receive the form you will be notified about item return possibilities.