



Returns Authorisation

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Outdoor Sports New Zealand Limited

Fax: 0800 88 3006

E-Mail: returns@osnzl.com

REQUEST TYPE

Return for Credit

Replacement Required

Product for Repair

Invoice Number:

Store Name: _____

Store Reference: _____

Date: _____

Email / FAX: _____

OSNZL Product Code: _____

Description of Return: _____

Reason for Return: _____

Details of initial testing: _____

Disclaimer: OSNZL reserves the right to charge a fee if the item returned is found to be free of fault or complaint. No items will be accepted or reviewed without the return of this form and the issue of an official Goods Return Authority. By signing this document, you agree to OSNZL's terms and conditions of returns as stated in OSNZL's goods return policy.

Dealer Contact Name: _____

Dealer Signature: _____

Cut on dotted line and apply to package/s to be returned ▼

GRA #

Outdoor Sports NZ Ltd
16 Aztec Place
Frankton,
Hamilton 3204