

RETURN FORM | CUSTOMER DETAILS

ORDERNUMBER _____

NAME _____

ADDRESS _____

POSTAL CODE _____

COUNTRY _____

EMAIL _____

PHONE _____

RETURNED ARTICLES

REASON OF RETURN

PLEASE FILL IN THE FORM COMPLETELY AND SEND IT TO SHOP@THIRDMOVEMENT.NL AND ADD IT TO YOUR RETURN SHIPMENT.
UPON RECEPTION OF YOUR ARTICLES WE WILL REVIEW YOUR RETURNS AND ISSUE A REFUND UPON ACCEPTATION.

RETURN ADDRESS:

THE THIRD MOVEMENT BV

P.O. BOX 290 | 1620AG | HOORN NH | THE NETHERLANDS