

Item Code(s) to be Returned: _____

PO Number (if applicable): _____

LightForm Sales Order/Quote Number: _____

Delivery Date: _____

Has the item been installed?: YES NO

Does the item still have the original packaging?: YES NO

Has the item's box been opened?: YES NO

Reason for Return Request: _____

IMPORTANT

1. If you wish to return an item due to a defect or because you believe you've received an incorrect item, **do not use this form**. Please ask Customer Service (customerservice@lightform.ca) for the correct form.
2. LightForm decisions are non-negotiable.
3. Items may not be returned to LightForm without an approved RMA document.

Name of Client: _____ Date: _____

By submitting this document, the claimant accepts LightForm's policy dictates that all sales are final, and that they may refuse any return request without providing an explanation. If LightForm chooses to make an exception, customers will be responsible for the return shipping fees from LightForm to the manufacturer. The return request may also be subject to a restocking fee of anywhere between 25 – 50% of the item's value. The customer will be responsible for sending the items to the nearest LightForm showroom.

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