

# RETURN FORM

Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Address: \_\_\_\_\_

Contact phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Order Number: \_\_\_\_\_

Date of Purchase: \_\_\_\_\_

Receipt/ Invoice Number: \_\_\_\_\_

Product Reference Code & Description: \_\_\_\_\_

Reason for Return / Please describe the issue in detail: \_\_\_\_\_

For Refund requests please provide your bank account details:

1	ALPHA BANK
· Bank Name	
2	GR1201407790779002002009889
· Account Number IBAN:	
3	NEO SPITI KOS KALYMNOS EPE
· Account Holder Name:	

Please send this RMA request form along with your purchased item. You must also include a copy of your purchase receipt or invoice. (For refunds you must include the original purchase receipt)

Whether you are in Athens or not, please contact us by calling our customer support line at +30 22420 22001 or via email at [info@neo-spiti-kos.gr](mailto:info@neo-spiti-kos.gr) to make necessary arrangements. After you have contacted us you can send your purchased item in its complete original packaging at our store address: **4km provincial road of Kos , Fokalia**

In the event that a returned item is defective and within 14 days from date of purchase, we will accept charges for product shipping. In all other cases you will be charged with shipping expenses. You are responsible for items send to us, please make sure to carefully package returned items.