Returns Form

Firstly, read the Returns Conditions on the website. Then, complete the form below (as appropriate) and add it to your returned package. If you are making returns from multiple invoices, a separate returns form needs completing for each invoice.



Tex Automotive Limited

Range Road Cotswold Business Park Witney, OX29 0YB United Kingdom

FIRST NAME			LAST NAME									
EMAIL			DAYTIME TELEPHONE									
ORDER NUMBER	1	INVOICE NUMBER										
TYPE OF RETURN (Please tick as required)												
REPL	ACE ITEMS	ISSUE CREDIT AGAINST ISSUE A FULL REFUND										
RETURNED ITEM DETAILS												
Part	Description.				Reason for return (Tick ar appropriate)							
Number		Description		QTY	Α	В	С	D	Е	F	G	н

RETURNS KEY

- A. Ordered by mistake
- B. No longer required
- C. Delayed delivery
- **D.** Damaged in Transit
- E. Incorrect item received
- F. Item Doesn't fit
- G. Item not as expected
- **H.** Faulty Item

Package your goods and place this completed form in the package and send it to

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