

K Plus Pty Ltd

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Request for Return Authorisation Number

Note: This form must be filled out and faxed to us in order to generate a Return Authorisation. Please note that goods must be sent back with the Returns Authorisation form, which will be faxed to you upon receipt of this form.

Company name: _____ Date: _____

Contact person: _____ Title: _____

Phone: _____ Email: _____

Fax: _____

Reasons for returns: (please tick one)

Faulty product

Incorrect product supplied

Incorrect product ordered

K Plus Inv #	Product code/ Model #	Qty	Reason for fault

Please note that RA# issued is only valid for 7 days.

RA terms and conditions

- Please refer to our Returns Policy before filling out this form. The form is available at www.kplus.com.au.
- A copy of the RA form issued (not this form) is to be attached to returned goods along with a sample of faulty test print page. No returns will be processed without any of the abovementioned items.
- All credit returns must be unopened and in saleable condition otherwise credit may be rejected.
- Seal and secure all goods to ensure unbroken arrival without leakage or loss in transit.
- Delivery charges on return goods will not be paid by K Plus.
- A **10%** restocking fee will apply to goods being returned where original fault of supply lay not with K Plus.

Signed: _____
(I have read and understood all of the above)