Adrial d.o.o. Pod kostanji 6, 1218 Komenda, Slovenia info@crulle.com



RETURN FORM (CONTRACT WITHDRAWAL)

Order number:			
lavaisa avasbas			
Return date:			
CUSTOMER Name and surname: Address: Postal code and post: Phone: E-mail: Bank Account Number for the			
ITEM		Lot number (only for	
Item name	Quantity	spectacle lenses)	Return reason (check)
			☐ Wrong item delivered☐ Diopter selection error☐ Other
the same quantity and in the original par please include this form and the invoice. accordance with Article 43 of the Consu	om the contract without ckaging within 14 days o If you have already use mer Protection Law and	giving a reason within 14 days after the freceipt of the notification of withdrave and the item or if you have removed its drour Terms of use, i f the customer is	ne receipt of the goods. Items must be returned undamaged, in wal, at the customer's own expenses. When returning the item, seal, the withdrawal from the contract is no longer possible. In returning eyeglasses, the company will only refund the cost
of the frames. The refund will be proces	sed as soon as possible	, at the latest within 14 days after the	seller receives the returned items.
Refunds will be sent back to the original if the customer does not bear any addition		n making the payment, unless the cus	stomer expressly asks for a different payment method, but only
The company Adrial d. o. o. will process protection of individuals with regard to th with privacy policy, exclusively for the pu	e processing of persona	l data and on the free movement of su	16/679 of the European Parliament and of the Council on the uch data and repealing Directive 95/46/EC and in accordance
Date:		_ Customer	signature: