



CUSTOMER RETURNS FORM

Please complete all fields below and email a copy to us, as well as enclose a printed version inside the package

Returns will not be processed without the necessary paperwork

Packaging Guidelines – **Please Read Carefully**

- Do not wrap the original product box with adhesive tape
- Do not stick returns label directly to the product packaging
- Do not write on or damage any original product packaging

Date:	
Name:	
Address:	
Postcode:	
Contact Number:	
Email Address:	
Order Number	
Product Code(s):	
Courier Returning:	
Tracking Number:	

REASON FOR RETURN:

- Testing ☐ If you are returning an item for testing, please complete the second page of this form
- Warranty ☐ If you are returning an item for warranty, please see our warranty page on our website
- Refund ☐ If returned in suitable condition, refund may take up to 3-5 working days

Additional notes (please state why you are returning the item)

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TECHNICAL SUPPORT – RMA REQUEST FORM

Order Date	
Installation Date	
Failure Date	
Product Name(s)	
Product SKU & Serial Number (s)	
Quantity	

Fault or other details:

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Signed:		Date:	
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FOR OFFICE USE ONLY

Date Item(s) sent to Service Centre	
Consignment Number	
Date Item(s) Returned to BMS	
Outcome	

CUSTOMER RECEIPT

RMA Number	
Name of Staff Member	
Product(s)	
Date	
Fault or other details	
Outcome	

Company Address: Unit 29 Alexandra Way, Ashchurch Business Park, Tewkesbury, Gloucestershire, GL20 8NB.
Registered in England. Company Registration Number: 07476052.
VAT Registration Number: GB775428105

