

RETURN REQUEST FORM

Date: / /

CUSTOMER DETAILS					
NAME:		ORDER NUMBER:			
PHONE:		EMAIL:			
POSTAL ADDRESS:		•			
SUBURB:		STATE:		POSTCODE:	
RETURN ITEMS					
ITEM DESCRIPTION	SIZE	QTY	REASON	REASON CREDIT – Y/N?	
RETURN REASON					
☐ Fits Too Small ☐ Fits Too Big	g 🔲 Incorrect	tem receiv	red	☐ Faulty (please provide details)	
Additional Comments: (including e	exchange and faulty	informatio	n)		
Need to return something?					
Please ensure you read our policie	s before returning it	ems.			

Please ensure you keep a receipt of your payment for postage for your returns and provide us with a tracking number. Please email us to let us know to check the post box.

If you have any further questions please contact our customer service team via email info@oovy.com.au.

RETURNS ADDRESS

OOVY, PO Box 2060, Clovelly, NSW, 2031, Australia

https://www.oovy.com.au/shipping-returns