



Nespresso Benelux RETURN FORM

Please type in the appropriate information below, then print this form

Any questions?

Call us on BE 0800 162 64/ LU 8002 26 33

Personal details:

| | |
|--------------------------|-------------------|
| Club Membership Number*: | Phone Number: |
| First Name*: | E-mail address: |
| Last Name*: | Invoice number *: |
| Address: | Order Date: |
| Postal Code*: | Return Date: |
| City: | |
| (*Mandatory Field) | |

Products to be returned:

| PRODUCT REF. | PRODUCT DESCRIPTION | QUANTITY (CAPSULES) | RETURN REASON | (INTERNAL USE ONLY) |
|--------------|---------------------|---------------------|---------------|---------------------|
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Reason of the return:

| Order | Product | Quality |
|--|--|---|
| 1 Wrong product received 2 Wrong product ordered 3 Parcel damaged on arrival | 4 Different from the website description/brochure 5 Doesn't fit the expectations 6 No longer wanted/needed 7 Machines to be recycled* | 8 Quality issue with my machine/accessory 9 Quality issue with my chocolates/biscuits 10 Quality issue with my coffee |

Method of refund:

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|---|
| <input type="checkbox"/> I would like to be refunded to my Nespresso account <input type="checkbox"/> I would like to be refunded to the following bank account: _____ * No refund possible for machines to be recycled |
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Additional comments:

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|--------------------------------|-------|
| Signature: | Date: |
| I have read the Returns Policy | |