

STAR OPTIK D.O.O. BEOGRAD

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Registration number: 20098015
Code of activity: 4778

CONTRACT WITHDRAWAL FORM

MERCHANT INFORMATION	
NAME	Star Optik d.o.o. Beograd
ADDRESS	Raše Plaovića 2, 11160 BELGRADE
CONTACT PERSON FOR RECEIPT OF FORM	Ljiljana Čirović
BUYER INFORMATION	
FIRST AND LAST NAME	
ADDRESS	
CONTACT PHONE	
E-MAIL	
DATE OF CONTRACT/PURCHASE ORDER	
DATE OF DELIVERY OF GOODS TO THE CUSTOMER	
ORDER NUMBER	
DATE OF SUBMISSION OF THE FORM TO THE MERCHANT	
REASONS WHY THE GOODS ARE BEING RETURNED (the customer may or may not specify the reasons)	
In the event that the request for withdrawal from the contract is justified, the customer declares that he agrees to have the money returned to him by transfer to the bank account.	AGREE (circle the word "agree" and write the bank account number and name of the bank below)
Bank account number and name of the bank	

The merchant will confirm the receipt of the form in written or electronic form. The merchant will attach instructions on how to return the goods to the confirmation. Goods of smaller dimensions and which are not fragile can be returned by post or courier service. Bulky and fragile goods can be returned well-packaged and exclusively by a courier service that guarantees that the goods will be returned undamaged. The costs of returning the goods are borne by the buyer.

Data privacy statement: The data you provide in this form is used to record changes in the turnover of goods and Star Optik d.o.o. will not use them for other purposes.

Signature of the customer