

# **Batteries Direct – Returned Goods Form**

This form is required for all goods returned to Batteries Direct.  
Failure to include this form with any returned goods will delay any action requested

**INVOICE / BD #**

**TODAY's DATE:**        /        /

**NAME:**

**ADDRESS:**

**Phone Number:**

**Email Address:**

**DATE ORDERED :**        /        /

**Item Description / Part Number:**

**Reason for Return :**  
(Detailed description of problem and / or Reason  
for return, do not just write "Faulty")

**BD Internal Use Only**

**BDRG Number**

**Supplier**

**Claim Number**

**Sent for Evaluation**

**Date:**        /        /

**Received back**

**Date:**        /        /

**Report Details:**

**Comments :**

**Approved by:**

**Accepted / Rejected**

***Print and enclose a copy of the  
completed form with the returned goods.***

Return address : **Batteries Direct, Returned Goods Dept.  
8A Stanley Street, Peakhurst NSW 2210**