



CVS House, Owen Road, Diss, Norfolk  
IP22 4ER  
www.mipet.com

For MiPet Use Only	
Returns No.	<input type="text"/>
Return Agreed (Y/N)	<input type="text"/>
Date received	<input type="text"/>
Form input by (Initial)	<input type="text"/>

### MiPet Products Return Form

PLEASE NOTE WE WILL NOT ACCEPT RETURNS OF POM-V MEDICINES UNLESS  
THEY HAVE BEEN SENT IN ERROR OR ARE DAMAGED.

PLEASE COMPLETE ALL SECTIONS WHERE APPLICABLE

Order Date: ...../...../.....      MiPet order reference No: .....

Name of Practice:.....      Address:.....

Email Address:.....      Telephone:.....

Description	Product Code	Qty	Return (please tick)	Reason Code (see below)

- |  |                              |                            |
|--|------------------------------|----------------------------|
| 1. Received incorrect product          | 2. Parcel damaged on arrival | 3. Defective/damaged goods |
| 4. Other ( <b>please state below</b> ) |                              |                            |

Comments:
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Date Completed:.....	Print Name:.....
	Position:.....