



Replacement request form/Refund form

Safety Agency, s.r.o. (Ltd.)
Nádražní 21
51301 Semily
VAT: CZ28785606
E-mail: support@rigad.com

I hereby request a replacement of the goods/funds refund

Order number
Date of Order
Date of receipt of the goods
Forename and Surname of the customer
Address of the customer
Phone (Cell) No.

Return of the following products

SKU	Size	Product name

Requested replacement for the hereafter goods

Kód zboží	Velikost	Název zboží

IBAN number for refund

SWIFT

Please provide us with your IBAN number and SWIFT for a refund (credit/debit card refund is unfortunately not possible)

Date / Time

Signature

(send it with the goods)

Return shipping address: Safety Agency, s.r.o. (Ltd.), Nádražní 21, 513 01 Semily - Podmoklice, Czechia