



**Tesla UK**  
LIMITED

Unit 3b, First Avenue  
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## CUSTOMER RETURNS NOTE

Customer:		Date:	Your Returns Ref:
		Contact Name:	
		Contact Number:	Contact Fax:
		Contact Email:	
Product Code	QTY	Product Description	Reason for Return (Not working/ Faulty will not suffice)

Is there a claim for additional costs?:  
**(Please tick one)**

Yes (If yes, please contact Tesla for a claim form)

No **One MUST be ticked or your credit request will not be processed**

Name (Print):

Signature: