

OCTOBRE

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SECOND RETURN FORM

SURNAME NAME

ORDER NUMBER

EMAIL ADDRESS

REFERENCE(S) FOR RETURNING ITEM(S) & QUANTITY

.....

.....

NAME OF THE PERSON YOU ARE IN CONTACT WITH

.....

TO CONFIRM YOUR SECOND RETURN:

1. Write your order number by hand in the box at the bottom of the form
2. Cut along the line and visibly stick your order number on the front of your box
3. Slip the rest of the form in your box
4. If you have a free field when printing the return label, we recommend inserting your order number

RETURN ADDRESS:



SEZANE
C/O KUEHNE-NAGEL
Bâtiment 1
Zac du Val Bréon
1 Avenue Louis Renault 1877 1944
77610 Châtres

PLEASE ALLOW 7 TO 10 WORKING DAYS FOR OUR ATELIER
TO PROCESS YOUR RETURN PACKAGE.

- If your order was paid by a credit card, the refund will be made directly to the bank account debited during the purchase.
- However, please note that a refund of an order made with an e-gift card, gift card or credit note, will be automatically refunded as a credit note.



ORDER NUMBER

If you haven't already done so, please contact "bonjour@sezane.com" for your second return request