tischlerschuppen

Englisch – Withdrawal form

If you want to cancel the contract, then please fill out this form and send it back to:

Michael Wirges Tischlermeister
Gewerbegebiet Bitzen 7
53804 Much
Germany
Telefax: 00(49) 2247 / 75 84 08
E-Mail: info@tischlerschuppen.de

Hereby I / we (*) give notice that I / we (*) revoke from my / our (*) concluded contract for the purchase of the following products (*) / provision of the following services (*):

_____ _____
_____ _____
_____ _____
_____ _____
_____ _____

Appointed on (*) / received on (*) _____

Name of person / consumer (*) _____

Address of person / consumer (*) _____

Signature of / consumer (*) _____

Date_____

(*) Delete as applicable