

Cancellation form

NorviGroup Denmark A/S
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 Pantonevej 1
 6580 Vamdrup

Customer Information

Order no.:		<i>Please apply the webshop's invoice / order number.</i>
Name:		
Address:		
Tel.:		
E-mail:		
PostalCode:		

The following items where the right of withdrawal must be asserted

Date of receipt of the above goods (to be filled in by NorviGroup)

Date:	
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I hereby announce that I wish to assert the right of withdrawal in connection with the above goods. At the same time, I acknowledge that all information I have provided on the cancellation form is correct.

Customer's signature	Date

