

Withdrawal form

Buyer:

First name, last name, title/ business name: _____

Address of residence/ registered office: _____

Contact with the buyer:

phone number: _____

email: _____

(hereinafter referred to as "**buyer**")

I hereby terminate the purchase contract concluded with the seller, Ing. Peter Bočan – VIVIDO, Račianska 13152/69B, 831 02 Bratislava - Nové Mesto, ID: 54 188 474, registered in the Trade Register of the District Office Bratislava under No. 110-306693, (hereinafter referred to as "seller") and I return the seller within the statutory period of 14 days purchased goods according to the following data:

Order and invoice number: _____

Date of order: _____

Date of receipt of the goods: _____

Items I return (name and code): _____

Warning to the consumer: Under Section 10(4) of the Consumer Protection Act the seller is entitled to demand from the consumer reimbursement of the damage to the goods resulting from such treatment of the goods, which is beyond the treatment necessary to determine the characteristics and functionality of the goods.

Method of refund of the purchase price:

Please return the money to a bank account (IBAN)/other means:

_In town,city_____ Date_____

Signature of buyer _____