

REQUEST FOR CONTROLLED RETURN

Date of request:

Requested by:

REF #:

COLLECT FROM

Customer Name:

Contact Numbers:

Customer Address:

DELIVER TO

Delivery Address:

Description of goods to be collected:

SPECIAL INSTRUCTIONS

FREIGHT COMPANY INFO

Return Via:

Con Note Number:

Date of Pick up:

SALESPERSON NOTIFIED: (Name)

CUSTOMER NOTIFIED: (Name)

