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TEMPLATE OF A FORM OF WITHDRAWAL FROM THE AGREEMENT

(fill in and send back the form only if you want to withdraw from the agreement)

Address:

AGRODOCTOR-PL sp. z o.o. 65A/1 Krolewska str., 30-081 Krakow, Poland

address for the purpose of the return of the goods:

5 Kwiatowa str, 32-085 Modlnica, Poland

e-mail address: shop@agrodoctor.eu

fax. no.: +48 12 350 02 94

- I/We(*) hereby inform of my/our withdrawal from the agreement regarding sale of the following goods (*) agreement regarding supply of the following goods (*) a contract of specific work for the performance of the following activities (*)/agreement regarding the provision of the following service (*)
- Date of conclusion of the agreement (*)/collection (*)
- Consumer's name and surname
- Consumer's address
- Consumer's signature (only if the form is sent in the paper version)
- Date:
- * cross off the unnecessary items