



Product Return Form

Please Return Your Item to:

**Off Road Imports Holdings Pty Ltd
Unit 4/17 Rob Place
Vineyard NSW 2765**

Off Road Imports Invoice # : OR _____

Dealer Name: _____

Employee Returning Item: _____

Reason for Return: _____

Action Requested: Please Circle

Credit - Exchange - Warranty



**Off Road Imports
Ph: 02 4577 7022
Fax: 02 4577 7408
Email: sales@ori.com.au
Web: www.ori.com.au**