

INDIVIDUAL PARTNER RETURN POLICY & AGREEMENT

1. Overview

This Return Policy and Agreement is entered into by and between _____ (hereafter referred to as the "Company") and _____ (hereafter referred to as the "Partner"). This policy governs the process, conditions, and terms under which merchandise, inventory, or promotional materials provided to the Partner may be returned to the Company.

2. Eligibility Window

All eligible items must be returned within _____ calendar days from the original date of delivery. Returns initiated after this period will not be accepted for credit, refund, or exchange unless prior written authorization is granted by the Company.

3. Conditions for Return

Items submitted for return must comply with the following criteria to qualify for reimbursement or credit:

- Items must be in original, unused, and undamaged condition.
- Items must remain in their original, unopened packaging, complete with all original tags, manuals, and accessories.
- Promotional materials or customized items are non-returnable unless structural or printing defects are documented prior to receipt.
- Proof of initial delivery and original invoice or packing slip must accompany the return shipment.

4. Return Shipping

The responsibility for shipping costs incurred during a return is designated as follows:

- In cases of defective product or fulfillment error made by the Company, the Company shall bear all return shipping expenses.
- For standard returns or inventory adjustments initiated by the Partner, the Partner shall cover all freight, duties, and transport fees.

5. Restocking Fees

All qualified returns are subject to a restocking fee of _____% of the total wholesale value of the items returned. This fee will be deducted directly from the credit or refund amount issued to the Partner.

6. Processing Time

Once the returned items are received and inspected at the Company facility, processing will take approximately _____ business days. The Partner will receive written notification regarding the approval or denial of the return request.

RETURN REQUEST FORM TEMPLATE

Partner Name:

Partner ID / Account Number:

Original Invoice / Order Number:

Date of Original Delivery:

Date of Return Request:

Itemized Return Details

Item Number / SKU	Description	Quantity	Unit Value

Reason for Return:

Acknowledgment and Signatures

By signing below, the parties agree to the terms and conditions outlined in this Individual Partner Return Policy.

For the Company:

Authorized Signature

Printed Name & Title

Date

For the Partner:

Partner Signature

Printed Name

Date