

Return Request Form

Print and Fill Out This Page

Enclose with product(s) authorized. The RMA# MUST BE VISIBLE ON THE OUTSIDE OF PACKAGE!	RMA#		*Must Be Valic
1. Customer Information (same as origina	al order)		
Name:			
Address:			
City:			
State:	Zip:	Phone:	
Email:			
2. Reason for Return (use back if necesso	,		
All Return Requests Must Be Sign	ed and Dated Be	efore They Can B	e Processed
By signing Here You Are Request Agree with NGN Return and Exc	•	d Acknowledgin	g that you Fully
If you are not fully satisfied with your purcharyou will receive a full refund for unopened one(1) opened item, less shipping and han	items in the original fo	rm of payment and m	erchandise credit for
Signature		Date	

3. Return All Received Items to: NGN Return Department 8437 Tuttle Avenue #403

Sarasota, FL 34243

- Be sure to write the RMA# on the outside of the package or it will be refused.
- •Credits will be issued based on the condition of the bottles per our return policy.
- After returning the bottle(s), allow 2-3 weeks for your return to be processed. Customer is responsible for shipping the product back to our facility as well as any cost associated with it.
- •NGN reserves the right to refuse or reject any returns and deny any and all refunds if we suspect fraudulent activity or for any reason deemed appropriate by NGN. Return requests that do not completely comply with the NGN Return Policy will be rejected. Rejected items will be sent back at the customer's expense.
- •NGN is not responsible for items that may be lost, damaged, etc. or for any other reason why the package may not arrive to us in a timely manner. We recommend tracking the shipment.