Integrum Global Solutions (Pty) Ltd TA OccuSafe

Customer Acknowledgement Form

Customer Information

- Full Name: _____

- Contact Number: _____

- Email Address: _____

Refund/Replacement Details

- Order Number: _____

- Return Authorization Number: _____

- Refund/Replacement Amount: R _____

- Refund Method:

- [ ] Credit Card

- [ ] Electronic Transfer

- [ ] Cash

- [ ] Gift Card

- [ ] Other (please specify): _____

Refund/Replacement Confirmation

I, the undersigned, confirm that I have received the refund/replacement as stated above and that the matter has been resolved to my satisfaction.

Customer Signature

- Signature: _____

- Date: _____

Integrum Global Solutions (Pty) Ltd TA OccuSafe Representative

- Signature: _____

- Date: _____