# LAS Aerospace Ltd Cancellation Form

This form **must** be completed and returned to LAS Aerospace and authorised. **Without an authorised cancellation form goods are to be treated as not cancelled and still payable.**

**Order Details*.*** *(to be completed by the customer)*

Customer ID:

Job Number:

Date of cancellation request:

Part Details Whole Order *(tick box):*

|  |  |  |  |
| --- | --- | --- | --- |
| **Part Number** | **QTY**  | **Reason?** | **Authorised?**  |
|  |  |  |  |
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|  |  |  |  |
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Additional Notes

In cases where goods have been specially ordered in, there may be instances where in order for parts to be cancelled, there are fees incurred.

**Restocking fees.** *(to be completed by LAS Purchasing Team)*

Is there any restocking fees? *(Highlight appropriate)*

Yes

No

If yes, amount *(excl VAT)*

By signing this form, you are agreeing for the above-mentioned parts to be cancelled from your order, and you are agreeing to pay any fees mentioned above.

**Signed by:**

Signed

Name

Date

Company

**LAS Authorisation** *(to be completed by LAS Purchasing Team)*

Signed

Name

Date

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