

**WITHDRAWAL FROM CONTRACT FORM**

*(Fill out and send this form only if you wish to withdraw from the contract)*

business name: Ing. Adrián Vőrős

registered address: Nam. Hranicarov 8/A, 85103 Bratislava

Company Identification Number (CID): 57177210

Taxpayer identification number (TIN): 1084571807

registered in: Trade Register of the District Office Bratislava, No. 110-358291

e-mail: **info@compoacc.com**

web: <https://shop.compoacc.com>

customer service: [info@compoacc.com](mailto:info@compoacc.com)

IBAN: SK34 0900 0000 0052 3817 4185

Email: [info@compoacc.com](mailto:info@compoacc.com)

Tel.: +421948099721

Web: <https://shop.compoacc.com>

**Consumer:**

Name and surname:

Address:

Tel. no: email:

IBAN Account no.:

Order and Invoice Number:

Order date:

Date of Receipt of Goods:

I hereby inform you that I withdraw from the contract for the supply or provision of this product:

.....

Reason for withdrawal (optional):

.....

.....

Date .....

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Consumer's signature(s)  
(only if this form is submitted on paper)