

CONTRACT WITHDRAWAL APPLICATION

Please fill in this application and return it to the service provider only in case that you wish to withdraw from an off-premises contract or from distance contract according to Republic of Estonia Law of Obligations Act § 56 subsection 1



Contract Withdrawal Application

OÜ LEVIKOM EESTI

Pärnu mnt 139C

11317 TALLINN, EESTI

tugi@levikom.ee

HEREBY BY SUBMITTING THIS APPLICATION I WITHDRAW FROM CONTRACT, UNDER WHICH THE FOLLOWING UNITCOM PRODUCT(S) (SERVICES/MERCHANDISE) WERE SERVED*

Please insert the article of Merchandise, IMEI code and/or serial number if it exists, invoice or contract number. In case of Service(s) please insert the name of the Service(s) or extra Service(s), phone number (on the Contract).

Time and Date of submitting the Order (or concluding the Contract)/Date of receiving the Merchandise:

“ _____ ” _____ 20___.a. (day/month/year)

First- and last name of the Consumer:

Effective home address of the Consumer:

E-mail address of the Consumer:

Telephone number of the Consumer:

Please make the repayment to my following bank account (IBAN):

Reason for submitting the Contract Withdrawal Application (filling voluntary):

Consumer signature:

(Upon submitting Contract Withdrawal Application on paper- handwritten signature is required/ upon submitting Contract Withdrawal Application electronically e.g via e-mail- digital signature is required)

Date:

“ _____ ” _____ **20** ____ **.a.** (day/month/year)