



ENAGIC INDIA KANGEN WATER Pvt.Ltd

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Tel: 080 46509900

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Machine Pick-Up Authorization Form

I, _____ I/C, _____ authorize
(Name of Buyer)

_____ I/C, _____
To pick-up my _____ from the Enagic India. Office (Name of Unit)

On ___ / ___ / ___ .

I understand that this person is fully responsible for my machine from the time it leaves the office until such time as I receive it in my possession. Enagic India will not be held responsible for any by damage that is incurred upon the product while in transit. I also understand that the return policy takes effect from the time said machine leaves the office, and not the date it is received by me, the buyer.

_____ / /
(Signature of Buyer) (Date)

_____ / /
(Signature at Pick – up) (Date)

OFFICE USE

Handover by :