

WITHDRAWAL FORM

AS PER ARTICLE L121---20---12 OF THE CONSUMER CODE



Dear Sir, Madam,

If you are not satisfied with your purchase, you may notify us of your decision to return your product/s by regular mail or courier within 14 calendar days of receipt of your order.

You then have an additional deadline of 14 (fourteen) days to return the package to us. This return is only valid if the attached withdrawal form is addressed to us, legibly and fully completed, before expiry of the 14 day deadline set out in article L121---20---12 of the consumer code.

The withdrawal form must be sent to the following address :

Service Clients IOMA
116bis, Avenue des Champs Elysées
75008 PARIS

We will reimburse you the entirety of the treatments purchased that have been returned to us, as long as the products have not been opened, the protective cellophane film and packaging have not been removed or damaged, and the products have not been used.

Please note, personalised Day and Night Ma CREME treatments may not be returned.

The IOMA quality department entrusted with the inspection of the product/s returned, goes on the condition of the product after unwrapping the return packaging. We therefore recommend you use robust packaging to avoid any damage to the product during transport; ideally use the original packaging. The invoice corresponding to this purchase should be returned to us in the package.

We will refund by bank transfer to the account used when ordering, the price of the returned products, if already paid, within 14 (fourteen) days from the date IOMA received the returned products. Any return postage will be paid by INTUISKIN only if the product reimbursement is granted. Otherwise, any return postage will be at your expense.

We do not accept returns and do not make refunds of products ordered on other e-commerce sites or perfumeries.

We hope to see you shortly at the IOMA online store.

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Withdrawal form for the attention of IOMA



Name* :

Surname* :

Full postal address* : Telephone*

:

Number of the order affected by your request* :

Date of the order* :

Date of receipt of the order* :

The reason for your return :

Done in* :

Date* :

Signature(s) preceded by the hand-written note " Read and approved "** :

*compulsory fields