

## NOTICE OF RIGHT TO CANCEL THE CONTRACT

Part 1 of this form must be completed by the supplier.

Part 2 should be completed, detached and returned to the supplier by the Customer if the customer wishes to exercise his/her right to cancel the contract within the Cancellation Period. You do not have to use this form if you prefer to send in a letter by post, fax or e-mail, but please give the information in Part 2.

Part 3 should be completed, detached and returned if the consumer wishes for the work to be started prior to the expiry of the Cancellation Period.

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### 1) Cancellation Information

Date of Issue:

Contract Reference Number/Order Number/or description:

Name and address of Supplier:

Name and address of person to whom the Cancellation Notice may be given, or email address to which it may be sent:

**Customer Cancellation Rights** You may have the right to cancel this contract if you wish within fourteen days starting on the day you receive the Goods. Cancellation should be communicated in writing by delivery, post or email to the person shown above. You are advised to take a copy of the Cancellation Notice before returning it to the supplier.

The following Cancellation Notice (Part 2) may be used to exercise this Right as stated above, if using post it is advised to obtain a Certificate of Posting or Recorded Delivery Slip.

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### 2) Cancellation Notice

If you wish to cancel the contract you **MUST DO SO IN WRITING** and deliver it to the person named below either in person, by post or by email. You may use this Part of this form to do this but you do not have to.

Complete, detach and return **ONLY IF YOU WISH TO CANCEL THE CONTRACT** within the fourteen-day cancellation period.

To:

I/we (delete as appropriate) hereby give notice that I/we wish to cancel my/our contract

Reference Number:.....

Name:.....

Date.....

Address.....

Post Code.....

Signature .....

**3) Work commencing prior to the expiry of the fourteen- day Cancellation Period.**

If you require the work to commence before the fourteen day Cancellation Period expires you are required to confirm this in writing and can use this form to do so.

If you have agreed, in writing, that work will commence before the fourteen day Cancellation Period expires AND you subsequently cancel in accordance with your rights, you are advised that reasonable payment may be due for any work carried out.

I/we agree that work under my/our contract Reference Number..... may commence on ..... before the Cancellation Period has expired.

I understand that if I decide to cancel within fourteen days I may be asked to pay for any work that has been carried out prior to my/our cancellation.

Signed.....

Dated.....

Name.....

Address.....Postcode.....

**Acknowledgement of the hygiene considerations**

**It has been explained to me that the Goods that I am being supplied with are of a personal nature and have health protection and hygiene issues, and for this reason I accept that there will not be a 14 day cancellation period under the (Consumer Contracts (Information, Cancellation and Additional Charges) Regulations 2013, Part 3 section 28 (3) (a)**

**I hereby sign my confirmation that this has been explained to me**

Signed.....

Dated.....

Print Name

**Consent to pay for a non refundable professional service**

**It has been explained to me that I will receive a professional service such as a hearing test and that I will be unable to receive a refund for this service in the event that I cancel any order for Goods.**

**I hereby agree to this non refundable payment**

Signed.....

Dated.....

Print Name