



# Complaint report

Complaint's part: ( fills in dealer )	Contact person:
Company/name and customer's address	Telephon/Fax:
Cell phone:	E-mail:
Trader identification number	Notes:

CLAIMED GOODS:

CAT. NUM:

SIZE:

CLAIMED GOODS:	CAT. NUM:	SIZE:

**Invoice number\*:**

Detailed description of the problem:



<p>The proposed method of complaints ( <i>circle the option</i> )</p> <ul style="list-style-type: none"><li>a) Repair of goods</li><li>b) Goods replacement</li><li>c) Money's return</li><li>d) Other ( write )</li></ul>	<p>Note:</p>
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<p>Goods will be accepted for complaint procedure under these conditions:</p> <ul style="list-style-type: none"><li>1) When to apply warranty ( replacement ) service is an integral part of this complaint protocol copy of the invoice.</li><li>2) The goods will be returned to your supplier for complaint procedure complete in its original packaging or packaging that will adequately protect goods in transit ( customer is responsible for this package )at the customer's expense.</li><li>3) The goods must not be mechanically damaged by the customer. Customer attempts to repair the goods are prohibited and may be viewed at them as and unjustified claim!</li><li>4) Products must be returned within 7 working days.</li><li>5) the seller does not cover the cost of returning the products</li></ul>	
<p>Date:</p>	<p>Dealers's signature:</p>

<p>Service area: ( fills in ARC 24 )</p> <p>Expression of seller, technician:</p>	
<p>Date:</p>	<p>Seller 's signature:</p>

PICTURES: