

## **COMPLAINT FORM**

To be completed by the Customer			
Complaint Date		Invoice number	
CUSTOMER	Company		
	Name and surname		
	Address		
	Phone		
	Address e-mail		
COMPLAINT INFORMATION	Product name and code		
	Quantity		
	Complaint Details		
	Proposed action response	Sending elements / repair / replacement for a new one / invoice correction / discount	
	Pictures of the damage / defect	Please attach pictures of the damage/defect up close as well as from a distance indicating the place of damage/defect of the product (in the absence of pictures, the complaint will be rejected)	YES NO
	Picture of the quality control sticker	Please attach picture of the quality control sticker which is on the back of the product or inside the package	YES NO
	Pictures of the product packaging	Please attach pictures of the product packaging (in the absence of pictures, the complaint will be rejected)	YES NO
	Picture of the stamp from packaging	Please attach picture of the stamp from the packaging, which should be next to the product code	YES NO
	Written damage report	In the case of receiving a damaged shipment: Please provide a written report in the presence of the courier / carrier performing the delivery (in the absence of the report, the complaint will be rejected)	YES NO
ADDRESS DETAILS	Address and contact details in the case of receipt of goods	Address:	
		Phone:	
	Address and contact details in the	Address:	
	case of shipping the goods / sending the elements	Phone:	
To be completed by the seller			
ACCEPTAN CE OF COMPLAIN TS	Complaint number		
	Date of receipt of the complaint		
	The person receiving the complaint		
COMPLAINT OUTCOME	Decision	Complaint accepted / Complaint rejected	
	Reasons for the decision		
	Resolving the complaint	Sending elements / repair / replacement for a new one / invoice correction / discount	
	A correction invoice was issued	YES / NO	
	Date of accepting the complaint and issuing the correction invoice		
OTHER	Release confirmation (bill of lading number)		