

# Compliant Form

**Buyer:**

**Name and Surname: \***

**Adress: \***

**Phone: \***


**I hereby claim the goods listed below with a description of the defect**

**Name of the product: \***

**Date of Order: \***

**Invoice No.: \***

**Description of the defect:**


Note:

Complaint Form must be signed by hand. Fields marked with an asterisk are required. We recommend printing in two copies - one for the seller and the other for you.

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**Date and signature of buyer**