



COMPLAINT FORM

NON-CONFORMITY OF THE GOODS WITH THE SALES AGREEMENT

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..... (date)

1. Claimant

First name and last name

Phone number

Address

Email

2. Description of product

Order number Date of purchase

Goods description (type / appearance / number).....

.....

3. Reason for complaint

Accurate description of defects or non-compliance with the order:.....

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When and under what circumstances were the defects/nonconformities identified:.....

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4. Claimant's request

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..... (Signature)