

WARRANTY CLAIM REPORT

(filled in by the buyer)
Buyer's name and address:

Contact person:

Phone number/fax number:

Cell phone number:

E-mail address:

Corporate ID No:
(and VAT ID)

Notes:

Return address for sending the goods:
(Do not fill if it is identical with the address mentioned above!)

Claimed goods or services:

Date of purchase:
(Invoice date)

Invoice No:

Detailed description of the defect: *

Proposed method of claim settlement:

1. We advise you to attach a receipt or invoice if it has been issued, or other document evidencing the purchase of the goods.
2. When sending the goods, wrap it in the suitable packaging to avoid damage or destruction.

Date: _____

Signature: _____

(filled in by the seller)

Date of assertion of the claim:

The claim is settled by:

Statement of the seller:

Date: _____

Signature: _____