PRODUCT COMPLAINT

NO .....

(The seller's stamp)

Drawn up on* .....20.….

in .....
(name and address of the commercial / service facility)

Name and surname of the advertiser*.....

Address and telephone number*:.....

The date of purchase of the goods*.....

Name (designation) of the goods*.....

Price of the goods.....….....proof of the contract - bill* .....

Description of the non-conformity of the product with the contract *:

….....

…….....

.....

.....

When and in what circumstances the non-conformity of the goods with the contract was stated *:

….....

……..

…….....

….....

....

(signature of the advertiser) *(seller's signature)*

Warning!

* Required fields.

THE COMPLAINT HAS BEEN **ACCEPTED / NOT ACCEPTED**

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