

ANNEX 1 - COMPLAINT FORM

To: forensee s.r.o., Oškobrň 11, 289 06 Opolany
info@faradaybags.eu, tel. +420 315 55 88 70

Making a claim

Date of conclusion of the Contract:	
Name and surname:	
Address:	
E-mail:	
Goods that are claimed:	
Description of defects Goods:	
Suggested method for handling the claim:	

At the same time, I request a confirmation of the claim stating when I exercised this right, what is the content of the claim, what method of claim settlement I require, together with my contact details for the purpose of providing information on claim settlement.

Date:

Signature: