

COMPLAINT FORM

Please, fill in the form and attach the proof of purchase in our shop (invoice/order confirmation/payment confirmation)

1. Date of deposit of the complaint:.....
2. Date when the damage was noticed:.....

Name:	E-Mail:
Correspondence address:	Phone number:
Product name:	Purchase date:

THE REASON OF COMPLAINT:

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1. Expected solution:

- ☐ Defect removal/repair
- ☐ Exchange to a new item
- ☐ Others/Which?.....

Client's signature*

.....

The complaint will be considered within 14 days from the receipt of the product. The subject of complaint are products originally defective, which defect was discovered within 24 months of the purchase date. In case you have any questions, please contact us: info@fairma.pl tel.: +48 660 947 421

*I hereby agree for processing my personal data, included in this complaint for the purpose of complaint (as defined in the Act of August 27.08.1997r. on the Protection of Personal Data – Journal of Laws No 101, item 923).