



Form for the enforcement of consumers' rights upon a material defect on a product

Customer Information (fill out the form and send it only upon establishing a material defect within 24 months from the receipt of the product):

Name, surname: _____

Address, postcode and place: _____

E-mail address: _____

Telephone number: _____

Invoice no.:

Order no.:

Product name:

A detailed description of the material defect:

If the material defect is established, I wish (circle):

1. To receive a refund of the purchase price.
2. To have the same product replaced (if the provider can still ensure it).
3. That the defect on the product is eliminated.

Please transfer the refund of the purchase price to the bank account:
SI56 _____, held at the bank

_____.

Signature of the customer:

Place and date: