

DATE:

CUSTOMER COMPLAINT FORM

Please fill all the required blanks and enclose copies of your records (a receipt, a VAT invoice or other)

1. ENTERPRISE DETAILS:

Laboratorium NOVA s.c.
32-003Podłęże
Podłęże 376

2. CUSTOMER DETAILS:

First and last name:

Address:.....

Telephone number

E-mail address:

3. OBJECT OF COMPLAINT:

Name:

Price:

Order Number:

Proof of Purchase:

Purchase Date:

Date Problem Occured:

Date of Complaint:

4. DETAILED DESCRIPTION OF THE FAULT/DAMAGE WITH THE CAUSE OF COMPLAINT INCLUDED:

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.....

5. AN EXPECTED OUTCOME (please choose just one from the options below):

REPAIR REPLACEMENT PRICE MARKDOWN REFUND

If having chosen a PRICE MARKDOWN or a REFUND option, please include your bank account details:

First and last name:

The name of the bank:

The bank account number:

Please send the product(s) and the completed customer complaint form here:

Laboratorium „NOVA” s.c. - Sklep internetowy
32-003 Podłęże
Podłęże 376

The rules of complaint processing are regulated by the act issued on the 27th of July 2002 regarding the specific terms and conditions of consumer affairs and amendments to the Civil Code (Journal Of Laws of 2002. number 141, item 1176) and other binding regulations.

Customer signature:

6. THE DETAILS OF COMPLAINT PROCESSING (to be completed by “NOVA” GbR The Laboratory of Cosmetic Analyses):

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.....
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Date:

Complaint received and processed by (signature):

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