

Order No.:

ARTELIONI

COMPLAINT NOTIFICATION FORM / RECORD OF COMPLAINT RECEIPT AT ARTELIONI.COM CUSTOMER SERVICE CENTRE

CUSTOMER CONTACT DETAILS	Full name: Address: Phone: E-mail address:
AGREEMENT DETAILS	Date of purchase:, Value of item:, Item name: Model (brand):, Size (ref.):, Other: Proof of agreement conclusion / proof of purchase enclosed by Customer: <input type="checkbox"/> receipt <input type="checkbox"/> invoice <input type="checkbox"/> warranty card (original) <input type="checkbox"/> account statement <input type="checkbox"/> certificate no.: <input type="checkbox"/> other:
REASON FOR COMPLAINT	Description of non-conformity of goods / defect / service: When and under what circumstances was the non-conformity/ defect discovered:
CUSTOMER CLAIM	CUSTOMER CLAIM: <input type="checkbox"/> pursuant to the Act on specific terms and conditions of consumer sales and amendments to the Civil Code of July 27, 2002 or the Act of April 23, 1964 - the Civil Code <input type="checkbox"/> based on warranty terms and conditions

For information on how your complaint has been resolved, call +48 61 895 57 88 or send an e-mail to contact@artelioni.com.

No response from the retailer within 14 days shall mean that your complaint has been admitted and that your claim is being fulfilled.

I have been advised that the use of this form is voluntary and that I may submit my complaint in another manner I find convenient.

Customer signature:

RETAILER RESPONSE	How was the complaint resolved:
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* delete where inappropriate