

**COMPLAINT FORM**

.....  
(date, place)

.....  
(name)

.....  
.....  
(address)

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I hereby declare a claim for the following goods: .....

Date of purchase:.....

Order Nr :.....

Date of defect detection :.....

Description of the defect and circumstances of disclosure:.....  
.....

Customer expectations (please mark):

- repair
- exchange for goods free from defects
- price reduction
- money refund for the defective goods

Bank account number for money refund (in case of return of goods):.....  
.....

Name of the bank account holder:.....

.....  
(signature)