**COMPLAINT FORM**

**Address: Smarthink trade and consulting, s.r.o., Jaselská 102/29, 74601 Opava**

**Making a claim**

|  |  |
| --- | --- |
| Date of conclusion of the Contract: |  |
| Name and surname: |  |
| Address: |  |
| E-mail address: |  |
| Goods that are claimed: |  |
| Description of defects Goods: |  |
| Suggested method for handling the complaint: |  |

At the same time, I ask for a confirmation of the claim stating when I exercised this right, what is the content of the claim, what method of claim settlement I require, together with my contact details for the purpose of providing information on the claim settlement.

Date:

Signature: