

COMPLAINT FORM

Seller:

4impex s. r. o.
Rybárska 291/19, 962 31 Sliač, Slovakia
Company ID (IČO): 53087534
Tax ID (DIČ): 2121260526
VAT ID: SK2121260526
E-mail: info@campzones.com
Phone: +421 911 633 183

CUSTOMER INFORMATION:

Full name:
Address:
E-mail:
Phone:

ORDER DETAILS:

Order number:
Order date:
Date of delivery:.....

PRODUCT BEING CLAIMED:

Product name:
Quantity:
Price per unit: EUR

DESCRIPTION OF DEFECT:

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REQUESTED SOLUTION:

(please check one option)

- ☐ replacement of the product (In the case of a product return or replacement, the item must meet the following criteria: it must not be opened or used, and must show no signs of wear or use. The product must also retain its original labels and be returned to the Seller in its original packaging.)
- ☐ repair of the product (if applicable)
- ☐ discount on the price
- ☐ withdrawal from the contract (refund)

DATE OF COMPLAINT SUBMISSION:

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CUSTOMER'S SIGNATURE:

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*Please send this form to **info@campzones.com** and include pictures of defected product. We will process your complaint and inform you via e-mail within 30 days.*