

COMPLAINT FORM

Please complete all required fields. The complaint product should be sent dry and, if possible, clean.

DATE OF SUBMITTING THE COMPLAINT:		DATE OF DETECTION	DATE OF DETECTION OF THE DEFECT:	
CURRENT CUSTOME	R CONTACT DET	AILS		
NAME AND SURNAME / COMPAN	NY:			
STREET / HOUSE NUMBER:				
POST CODE, CITY:				
E-MAIL:		PHONE NUMBER:		
BANK ACCOUNT NUMBER:	ease enter your account number in IB/	AN format		
DATA OF THE PROD		AN IOTHEC		
ORDER NUMBER:				
NAME OF THE COMPLAINT PROI	DUCT:			
MANUFACTURER CODE OR PRO	DUCT EAN:			
DESCRIPTION OF TH	E DEFECT			
FACTORY DEFECTS	MATERIAL ABRASION	CRACKED SOLE	CROPPING OF THE MATERIAL / FRACTURE OF THE MATERIAL	
HOLES	COLOR PROBLEM / COLOR PEAK	DAMAGED KEEPER	WRONG MODEL	
NO BUTTON / DAMAGED RIVET / DRIVE	OVERPRINT	WRAPPING	WRONG SIZE / COLOR / FABRIC	
SEAM PROBLEM	SPLITTED SOLE	BROKEN SLIDER	THE REMAINING (COMPLETE DEFECT DESCRIPTION)	
UNDER WHAT CIRCUMSTAN	CES WAS A DEFECT FO	UND?		
DURING USE	OTHERS			
EXPECTED FORM OF DEALIN	NG WITH COMPLAINTS:			
REPLACEMENT FOR A NEW	REPAIR	MONEY BACK (WITHDRAWAL FROM THE CONTRACT)	PRICE REDUCTION TO THE PRICE	
Please send the product (s) together with th 32-002 Kokotów, Poland with the note "DC A	NSWEAR - PRM COMPLAINTS". For sec	curity, please send parcels with		
confirmation pickup or using the services of receipt of the goods by Answear.com. If you Service Office at telephone number +48 (12)	nave any questions regarding the comp		(!)	
We process your data contained in the comp	laint form in order to implement the c	complaint process. The basis for	\odot	

DC ANSWEAR PRM COMPLAINTS Kokotów 812 C 32-002 Kokotów Poland

Address label to be affixed to the parcel containing the product under complaint.

The label is only an aid to the correct addressing of the parcel, it does not dictate the method of shipment of the product under complaint.