



CLAIM FORM

The form must be printed, filled in, signed and scanned sent to the e-mail address below, or inserted into the shipment with the claimed goods.

Addressee (seller)

E-shop: www.montone.cz
Company: **MONTONE sport s.r.o.**
Based: **Svetlogorska 2765, 390 05 Tabor**
ID/VAT number: **Reg.nr.: 09995293/VAT nr.: CZ09995293**
E-mail address: info@montone.cz
Telephone number: **+420 601 354 983**

Claim (to be filled in by the buyer)

- Date of ordering:
- Order number:
- Goods that are claimed:
- Description of defects of the Goods:

- Proposed method for settling the complaint:
 1. Exchange for new goods
 2. Repair of goods
 3. Reasonable discount on the purchase price
 4. Withdrawal from the contract

- Name and surname of the consumer:
- Address of consumer:
- Email:
- Phone:

Done at , On

.....

Name and surname of the consumer