

## COMPLAINT FORM

*(Fill in and send this form only if you wish to file a claim for the goods)*

**Operator:**

**SearchingSK, s. r. o.**

Pluhová 10

831 03 Bratislava

Slovak Republic

CRN: 53 074 530

e-mail: [info@seedscentrum.com](mailto:info@seedscentrum.com)

## APPLICATION OF COMPLAINTS

**Customer:**

Title, Name and Surname: .....

Permanent address: .....

Postal address: .....

Contact: e-mail: .....

Phone number: .....

I hereby file a claim for the goods:

Code and Name of goods: .....

Order Number: .....

Date of ordering the goods: .....

Order acceptance date: .....

Proof of purchase of goods: .....

**DESCRIPTION OF THE COMPLAINED DEFECT OF THE GOODS:**

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.....  
.....

In the case of settling a complaint in the form of a refund of the purchase price of the goods, or by paying a reasonable discount on the goods, I provide information about my bank account:

Bank

IBAN:

IN ....., Date: .....

.....  
Customer's signature