

Place, date

The User data:

Name, surname _____

E-mail address _____

To:

Evermotion Adam Kozłowski Krzysztof Kundzicz Paweł Gajlewicz spółka cywilna

Białystok (Poland), 8 Przędzalniana Street,

NIP 542-29-10-299

Complaint form

The Evermotion Product name: _____

Order ID: _____

Date of the Transaction: _____

Type of defect: _____

Date of finding of defect: _____

Claim (in accordance with Polish Civil Code - please underline the correct claim):

- exchange for the new Evermotion Product (art. 561 § 1 of Polish Civil Code)
- the Evermotion Product fixing (art. 561 § 1)
- reduction of price the Evermotion Product by _____, the amount of reduction shall be sent to the following banking account _____ (art. 560 § 1)
- withdrawal from the Transaction and a refund of the price to the following banking account _____ (art. 560 § 1)

Signature
