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Date

Customer Complaint Form

Auto Gamma, Ciepłownicza 54, 31-587 Kraków NIP: 513-027-32-13

I declare that I am aware of the return conditions in the event of withdrawal from the concluded contract according to art. 27 law from 30 May 2014 referring to consumers rights (Dz. 4. 2014 r. Poz. 827). I withdraw from sales agreement:

Item name	Amount	Value	Reason*

*Reason is not obligatory in case of the long distance purchase.

Date of: contract conclusion [ ] / pickup of the ordered item [ ]

day / month / year

Proof of purchase: bill [ ] / invoice [ ]

Number of proof of purchase

Name and Surname

Address (Street, Building number)

Address (Zip code, City)

Contact number

E-mail:

Description of complaint, customer comment: .....

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Refund: on my bank account

Refund [ ] Repair [ ] Exchange [ ]

Bank name

Bank account number

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Autogamma employee signature

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Legible customer signature