

**CLAIM FORM**

Seller: **Rambula.cz s.r.o.**, with registered offices at Na Korábě 362/4, Libeň, 180 00 Praha 8, file No. C 368788, registered with the Municipal Court in Prague, IČO/ID NO.: 172 42 835

Correspondence address: **Mělnická Vrutice 77, Velký Borek, 277 31 - CZECHIA**

E-mail address: [info@rambula.cz](mailto:info@rambula.cz)

**I hereby make a claim.**

Date of conclusion of the contract (confirmation of the order by the seller) or/and order number:	
Name and surname:	
Address:	
E-mail address:	
Identification of the goods that are claimed:	
Description of a defect of the goods:	
Suggested method of handling claim, possibly indicating the number of bank account to provide a discount:	

Buyers signature (Only if this form is sent in letter form)

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Date: .....