

CLIENT COMPLAINT NOTIFICATION

Date of complaint lodgement

	-		-	
YYYY		MM		DD

Filled out by an employee of the Sales Support Department in Silspek Rubber

Complaint number

NO./YEAR

1. Details of Client (company or person lodging the complaint)

Company name

Contact person

Street

Telephone

Code/City

Fax

Tax ID

Order number

E-mail address

2. Details of the product claimed

Product name

Purchased

quantity

kg

Quantity claimed

kg

Date of manufacture YYYY-MM-DD

Invoice number

Date of purchase YYYY-MM-DD

Batch number

3. Subject of complaint (please specify precisely the subject of complaint)

 Photographs enclosed

 Sample of the goods claimed

 Other, please specify:

Place/Source of non-compliance identification

 Rejected by the Client's Quality Control

 At delivery (Goods Dispatched Note required)

 In the Client's manufacturing process

 Other, please specify:

4. What are your expectations?

 Discount

 Replacement of mixture

 Repair of mixture

 Other, please specify:

5. Additional information

 The mixture was stored according to the manufacturer's guidelines

 I hereby agree to the arrival of Silspek Rubber employees to verify the complaint's validity

Date, Client's seal and signature

The Client's complaint notification is deemed as complete if it includes photograph documentation and a sample of the goods claimed.