

Claims Statement for Faulty Goods

Sender Information

Name: _____

Address: _____

Phone: _____

Email: _____

Recipient Information

Company Name: _____

Address: _____

Date: ____ / ____ / ____

Claim Details

Order Number: _____

Purchase Date: ____ / ____ / ____

Product Name/Description: _____

Description of Fault:

Requested Resolution

☐ Replacement

☐ Repair

☐ Refund

Other: _____

Additional Comments

Signature: _____

Date: ____ / ____ / ____