



Empty box for date and claim number

CLAIM FORM

TO SUBMIT A CLAIM FOR GOODS PURCHASED FROM OUR STORE, PLEASE COMPLETE ALL FIELDS IN THIS FORM. THE CLAIMED PRODUCT MUST BE SENT DRY AND CLEAN. ATTACH THE COMPLETED FORM TO THE RETURNED GOODS TOGETHER WITH THE INVOICE THAT WAS SENT TO YOU ELECTRONICALLY IN THE FINAL ORDER CONFIRMATION EMAIL. YOU CAN ALSO DOWNLOAD THE INVOICE AFTER LOGGING INTO YOUR CUSTOMER ACCOUNT AT WWW.JAWAPARTS.COM.

CUSTOMER NAME AND SURNAME OR COMPANY NAME

ORDER NUMBER / INVOICE NUMBER

CUSTOMER ADDRESS

DATE OF RECEIPT OF GOODS

CUSTOMER E-MAIL

CUSTOMER PHONE NUMBER

INFORMATION ABOUT THE CLAIMED PRODUCT

PRODUCT NUMBER / PRODUCT NAME / QUANTITY

DESCRIPTION OF DEFECT / DAMAGE

DEFECT DISCOVERED [X] UPON RECEIPT OF GOODS [ ] DURING USE [ ] OTHER [ ]

PREFERRED CLAIM RESOLUTION: [X]

[ ] REPLACEMENT WITH A NEW PRODUCT [ ] REPLACEMENT WITH ANOTHER PRODUCT [ ] REPAIR [ ] PRICE DISCOUNT

[ ] CONTRACT CANCELLATION / REFUND\* \*CONTRACT CANCELLATION IS POSSIBLE ONLY IF REPAIR OR REPLACEMENT IS NOT POSSIBLE OR IF REQUIRED BY LAW.

IBAN (for refund if applicable) BIC / SWIFT: ACCOUNT HOLDER:

IBAN and BIC/SWIFT input fields

PLEASE SEND THE CLAIMED GOODS TOGETHER WITH THIS COMPLETED CLAIM FORM AND A COPY OF THE INVOICE TO THE FOLLOWING ADDRESS:

JAWAPARTS.COM / MOTOJELINEK, SANTRAŽINY 5342, 760 01 ZLÍN, CZECH REPUBLIC

FOR SECURITY REASONS, PLEASE SEND THE PACKAGE BY REGISTERED MAIL (WITH PROOF OF POSTING) OR VIA A COURIER SERVICE.

THE SELLER WILL CONFIRM RECEIPT OF THE CLAIM WITHOUT UNDUE DELAY. THE CLAIM WILL BE PROCESSED WITHOUT UNDUE DELAY, NO LATER THAN 30 DAYS FROM THE DATE OF ITS SUBMISSION, UNLESS THE SELLER AND THE CUSTOMER AGREE OTHERWISE. THE CLAIMED GOODS MUST BE SENT COMPLETE AND REASONABLY CLEAN.

THE CUSTOMER CONFIRMS THAT THEY HAVE READ THE SELLER'S TERMS AND CONDITIONS AND COMPLAINT PROCEDURE.

DATE OF CLAIM SUBMISSION

CUSTOMER SIGNATURE

CLAIM ASSESSMENT (TO BE COMPLETED BY JAWAPARTS.COM)

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CLAIM: [X] [ ] REPLACED WITH A NEW PRODUCT [ ] PRICE DISCOUNT
[ ] APPROVED [ ] REPLACED WITH ANOTHER PRODUCT [ ] REFUND
[ ] REJECTED [ ] REPAIRED

CLAIM RESOLUTION DATE, STAMP, SIGNATURE