**COMPLAINTS PROTOCOL**

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| **(to be filled in by the customer)****Firm / name and address of customer:** **Identification number (IČ):**(and tax identification number – DIČ) | **Contact person:****Phone /fax:** **Mobile:****E-mail:****Notes:** |

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| **Complaint issued for the service:** **Date contract entered into:**(Date of invoicing)**Date of the provision of the claimed service:****Invoice number:** |

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| **Detailed description of fault:** **Suggestion for a solution of this issue:** |
| In applying the rights of liability for defects, it is appropriate to attach the proof of the service provision contract.**Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Customer’s Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **( to be filled in by the provider)****Date complaint received:****Complaint handled by:****Provider’s comment:** **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Provider’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |