



SIA Aruna Dārzu street 29, Rēzekne LV-4601 Latvia	E-mail: info@sjuzanna.lv Phone: +371 24 66 77 88
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(Name, Surname)

(Address)

Post code LV- _____

I agree to receive a reply to my email address:

(answer can be electronically signed without signature) (buyer's signature)

Application no. _____

20___.y. _____. _____ (receipt date) at "SIA Aruna" online shop "Sjuzanna"

I purchased ___ size, code _____, item, ESA receipt number _____, price ___ Eur

Claim Description: _____

In accordance with the above, I wish to: _____

Visual evaluation of the product:

I agree to the repair: _____

(buyer's signature)

If the item is not collected from the store within 12 months of the date of filing the claim, it will be eliminated.

I got informed: _____ (buyer's signature)

Buyer returns item: _____

(buyer's name, surname, signature)

The seller receives the item: _____

(name, surname of seller, signature)

20__ .g.. _____ 20__ .g.. _____

Buyer Receives Item: _____

(buyer's name, surname, signature)

Seller Returns Product: _____

(name of seller, signature)

20__ .g.. _____ 20__ .g.. _____