



CLAIM FORM

Claimant

Full name:

Address:

Telephone:

Email:

Address for sending goods for a claim:

Rulyt s.r.o., Claims Department, Lounská 891, 438 01 Žatec, Czech Republic

Sales document / invoice number:

Date of sale: (1)

Order number:

Serial number:

Product code / name:

Description of the defect:

Contents of the package upon handover:

Please note: Always submit the goods complete with all accessories to avoid delays in handling your claim. Hand over scooters for repairs under or outside the warranty dry and free of heavy dirt. If excessively dirty equipment is delivered to the service department or handed over at the service location, a cleaning and maintenance fee may be charged, including for repairs under warranty.

Preferred way of resolving the claim:

☐

Repair

☐

Replacement

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Date and signature of the claimant

(1) On the invoice / tax document, this is the date of the taxable supply.