Returns Form for Faulty Goods

To: Eximitech d.o.o. Ulica Gradnikove brigade 53 5000 Nova Gorica Slovenia		Contacts +386 5 777 41 60 info@emonova.com	
Order Number		Order Date	
Receipt Number		Receipt Date	
Name of consumer			
Address of consumer			
Email			
Phone			
Detailed description of the nature of the fault:			
The content of the returned package (the returned products must be complete with all accessories):			
If the fault is confirmed (check your choice):			
☐ I request the reimbursement to be transferred to the following account number:			
□ I request the replacement with the same product			
☐ I request to solve the fault			
Date		Signature of consumer	