

Annex: Complaint form

COMPLAINT FORM - complaint number:

Gift Card Holder:

X-BIONIC®SPHERE a.s.
Reg. office: Dubová 33/A,
931 01 Šamorín
Company ID No.: 46 640 134
Tax ID No.: 2023504054
VAT ID No.: SK2023504054
giftcard@x-bionicsphere.com

Gift Card Holder:

Name/Business name:

Permanent residence/ Registered office:

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Company ID No.:

Phone:

E-mail:

I hereby file a complaint regarding the Gift Card purchased at the X-BIONIC®SPHERE a.s.

Description of the defect, subject of the complaint - Gift Card number

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Attachments:

I suggest that my complaint be handled in the following manner: (please cross out the inappropriate)

- repair of the defective Gift Card;
- issuance of a new Gift Card with the same amount of funds (Credit/Balance) and the same validity period as the Gift Card subject to the complaint;
- in the event of a defect that cannot be remedied or a recurring defect, withdrawal from the contract.

By signing below, the Gift Card Holder confirms that, prior to signing, they were informed by the owner of the Gift Card of their rights under Sections 622 and 623 of Act No. 40/1964 Coll., the Civil Code, as amended.

By signing below, the Gift Card Holder also confirms that they have read and understood the Privacy Policy of X-BIONIC®SPHERE a.s., which forms part of the General Terms and Conditions for the Use of X-BIONIC®SPHERE a.s. Gift Cards.

In

On

Signature:

Based on the above information, we hereby accept your complaint on behalf of X-BIONIC®SPHERE a.s.

In

On

Signature:

TO BE FILLED IN BY THE GIFT CARD HOLDER

Complaint No.: was handled as follows:

Upheld in the manner:

Rejected – justification:

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The complaint was settled on:

The complaint was handled by /name, phone, e-mail:

If your complaint has been rejected, you may request an expert assessment from one of the following: an expert; an authorised person registered with the Register of Authorised Persons maintained by the Slovak Office of Standards, Metrology and Testing; or a person designated by the Gift Card Holder.

Complaint number:

Stamp and signature:

Received by Gift Card Holder:

In On Signature:
