

COMPLAINT FORM			NORDflam Ref. No. (office use ONLY)
1	Product Name	Model:	Faulty part number (as per manual)
2	Compliant holder / customer address		
3	Product installation address		
4	Fitter and/or seller's address		
5	Date of purchase		
6	Date of complaint		
7	Details of the product complaint		
8	Date and circumstances when the fault / defect was noticed		
9	Recommended actions		
10	Complaint based on	<input type="checkbox"/> product not in accordance with the description <input type="checkbox"/> hidden defects	