



Complaint form BlackSatino dispenser

Date:

Item number BlackSatino dispenser:

Description of BlackSatino dispenser:

Production date (stamp inside the dispenser):

Amount of defect dispensers:

Please describe the problem:

.....

.....

Do you have a dispenser loan contract?

Yes ☐

No ☐

Do you have a photo of the defect?

Yes ☐

No ☐

If yes, please attach.

BlackSatino dealer:

Company:

Company:

Street / Number:

Street / Number:

Zip code: Location:

Zip code: Location:

Contact person:

Contact person:

E-Mail:

E-Mail:

Telephone:

Telephone:

Please send this form to: claim@wepa.de

Your complaint will be registered and we will contact you as soon as possible.

