

**COMPLAINT FORM**

CUSTOMER: ..... DATE: .....  
..... AGENT: .....  
Spoken with: ..... REFERENCE N°: .....

QUALITY NAME: ..... Control N°: .....  
Size (width x length): ..... Bale or piece N°: .....  
Design / colour / code: ..... Invoice N°: ..... of .....

DESCRIPTION OF THE COMPLAINT INSPECTED BY AGENT: YES / NO  
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**TO BE COMPLETED IN CASE OF FITTED CARPET ONLY**

Where fitted: ..... Fitted by: .....  
(full address) .....  
.....  
Composition household : ..... Date of fitting: .....  
N° of adults: ..... In which room: .....  
N° of children: ..... Method of fitting: .....  
Pets: ..... Floor: .....

**PROPOSAL FOR SETTLEMENT**

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**ADVICE TECHNICAL DEPARTMENT**

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