

# CHYLAK

## WARRANTY CLAIM

Please fill out the Warranty Claim Form, and place it in a box with the Product.  
Please seal the box and send within 2 years of the order delivery date to the following address:

**Omnipack - CHYLAK zwrot**  
**al. Katowicka 66**  
**05-830 Nadarzyn**  
**Poland**  
**Hala DC04, rampa 40**  
tel. +48 538 272 292

I hereby submit a warranty claim about the following Product:

reason:

order delivery date:

order/invoice number:

name:

mailing address:

phone number:

e-mail:

bank account (IBAN):

Signature:

Date: