

Notification and calculation of damage to goods

Name of the claimant: _____

Claim number: _____

Number of pages: _____

Number	To be completed by the claimant!					To be completed by the expert!					
	Description of damaged good	Product/Type	Quantity of damaged goods (pieces)	Year of purchase	Purchase price (Ft)	Certificate *	New value (Ft)	Transfer:		Amount of compensation	Property group
								%	value		
1											
2											
3											
4											
5											
6											
7											
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18											
19											
20											
21											
22											
23											
24											
Total claim / transfer:							Total damage to goods / transfer:				
Date: _____					*Symbols key: Q none SZ purchase invoice G warranty H instruction sheet E other		Date: _____				
_____ Signature of the claimant or representative							_____ Signature of the expert				