

COMPLAINT REPORT



Customer no.

CCV no.

Date

To be completed by the customer

Owner:	Retailer:
Address:	Address:
City:	City:
Phone no.:	Phone no.:
Contact:	Retailer's contact:

Towing vehicle

Towed vehicle

Brand:	Full trailer	Centre axel trailer	Dolly	Semi trailer
Type:	Manufacturer:			
Total weight:	Type:			
Model year:	Total weight:			
Reg. no.:	Model year:			
Type of transport:	Reg. no.:			
Plate suspension	Air suspension	Type of transport:		
		Plate suspension	Air suspension	

Product details

Type:	Mounted date:
Mileage, km.:	Removal date:
Reason for complaint:	
Compensation claim:	

Attach the complaint report when the goods are returned.

Completed by VBG Group Truck Equipment AB

Examined date	by		
Assesement:			
Action	Approved	Refused	Return date

Goods to be sent to:

VBG GROUP SALES LIMITED
Unit 7 Gemini 8 Business Park
Apollo Park, Charon Way
WARRINGTON WA5 7AE

Phone: +44 1925 234111