**Claim Form**

**Full Name**:

**Address**:

**Telephone**: **Email**:

**Receiving date**: **Receiving time**:

**Content**:

**Day**………..**Month**……….**Year**………. **Day**……..**Month**……….**Year**…………..

**OHASHI** **Customer**

**Solution**

**Content**:

**Day**………. **Month**………..**Year**…………..

**OHASHI**

* Ohashi only accept claim form if it matches with Ohashi’s usage conditions
* Ohashi only accepts claim form if customer contacts Ohashi within 24 hours starting from the period customer receive the products.
* Ohashi only accepts claim form if the product failure caused by Ohashi. Any attempt to fix the product failure caused by Ohashi from a third party without Ohashi’s permission is not accepted.
* Ohashi will contact customer within 48 hours after receiving claim form.
* Ohashi is the only authorized party in Vietnam in receiving and solving customer’s claim. Any attempt of sending claim form to a third party without Ohashi’s permission would make the claim form invalid.
* This claim form is only valid if it has Ohashi’s authorized person signature and Ohashi’s stamp.