

VONTELLE, LLC
BROKEN/DAMAGED or LOST/STOLEN CLAIM FORM

How to File a Broken/Damaged or Lost/Stolen Claim Form

*Complete form with the model, color name and supporting documentation (Police Report and/or Prescription).
Must send back broken or damaged glasses for no fee on prescription/lenses.*

Claim Date: _____

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Email: _____ **Phone:** _____

Please Check All that Apply:

BROKEN/DAMAGED

Broken/Damaged Glasses Returned

LOST/STOLEN

Police Report Included

Purchased Date: _____

Order Number: _____

Eyewear Name: _____

Color: _____

Prescription:

Yes	No
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Style: _____

If yes, please attached prescription with this form

Terms & Guidelines:

1. There is a one time replacement offered for product lost, stolen, or damaged beyond repair.
2. One time replacement within one year of original purchase. No exchanges or upgrades.
3. Customer is responsible for non-refundable processing fee plus shipping and handling costs.
4. Replacement coverage is non-renewable for replacement unit.
5. Rush service is not available, our standard turn around time is an average of 14 days.
6. Replacement coverage applies to the product only and does not apply to any accessory items including lenses, prescriptions, and etc.

Credit Card Number: _____

Exp Date: _____

Credit card for prescription/lenses fee only.

MM/YY

Name on Card: _____

CVV: _____

Signature: _____

Date: _____

By signing you are agreeing to these guidelines, our Terms of Use and Privacy Policy.

Mail to:
Vontelle, LLC
463 Lincoln Place #224
Brooklyn, NY 11238

Online: Attn: Lost, Stolen or Damage
customer@vontelle.com

FOR OFFICE USE DO NOT MARK IN THIS BOX

Model#

Authorization

Date Purchased#

Date