

CLIENT DETAILS			
NAME			
SURNAME			
LEGAL ENTITY NAME			
DATE			
EMAIL			
ADDRESS			
CITY		COUNTRY	
SUBMISSION TYPE (highlight yellow)	Complaint / Feedback / Suggestion		
DETAILS OF THE COMPLAINT/FEEDBACK: (Provide a detailed description of the complaint or feedback. Include any relevant dates, locations, product, service or individuals involved.)			
EXPECTED OUTCOME: (Specify what resolution, change, or action you are anticipating)			
SUPPORTING DOCUMENTATION: (List any documents attached to email, if applicable)			

DECLARATION:

"I declare that the information provided in this form is true and accurate to the best of my knowledge."

APPLICANT'S SIGNATURE:

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FOR MANAGEMENT USE:

RECEIVED BY	
POSITION	
DATE	
ACTIONS TAKEN: (Description of the action or resolution taken)	
IS FURTHER FOLLOW-UP REQUIRED? (highlight yellow)	
YES	NO

NOTES:

SIGNATURE:

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