**COMPLAINT FORM**

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|  | Date      |

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| **Bank** |
|  (on behalf of Danske Bank A/S, registration No. 61126228 and registered office at Holmens Kanal 2-12, DK-1092 Copenhagen K, Denmark, data stored with the Danish Business Authority) |
| **Registration No.** | Choose from drop-down list: 1. Estonia, 2. Latvia or 3. Lithuania |
| **Legal address** |   |
| **Data stored** | Choose from drop-down list: 1. Estonia, 2. Latvia or 3. Lithuania |
| **Phone number** |   |
| **E-mail** |  |

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| **Customer/Applicant** |
| Business name / first name, surname      | Registration No. / personal identification code / date of birth       |
| Representative first name, surname      | Representative personal identification code / date of birth       |
| Legal address / correspondence address      |
| Contact phone number      | E-mail      |

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| **Nature of Complaint** |
| Date on incident      | Place of incident      |
| Description      |
| Additional documents related to ComplaintNumber of documents:       |

**Contact channel for reply:**

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| [ ]  Danske eBank |
| [ ]  E-Mail1        |
| [ ]  Post       |
| [ ]  Phone       |

1All risks regarding sending info via email are accepted.

If the complaint involves Cards or online banking transactions, “Claim request” form must be used.

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| Signature of Customer/Applicant | **Signature of the representative of the Bank** |
| First name, surname:        | First name, surname:       |