**COMPLAINT FORM**

|  |  |
| --- | --- |
|  | Date |

|  |  |
| --- | --- |
| **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** |  |

|  |  |
| --- | --- |
| **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 |

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

**Contact channel for reply:**

|  |
| --- |
| 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.

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