

COMPLIANCE FORM

Name	
Address	
Telephone	
E-mail	
Policy Number	
Submission date	

The process of the complaint submission does not limit the right for legal claims, by its activation.

Issue:

Please mark (✓) the subject of your problem / complaint:

Information relative to the Company's products	
Delay or refusal to pay compensation / buyout	
Contact and customer service by the Insurance Broker/Agent	
Contact and customer service by Company (other than compensation claims)	
Excessive increase of premiums	
Difference in the amount of compensation /buyout	
Other	

Details of your issue or complaint:

(Please clearly describe the complaint, submitting all the relative details on dates, people involved, conversations, specific occurrences e.t.c.)

Attachments:

(Copy of insurance policy, receipts and additional supporting documentation)

1.
2.
3.
4.
5.

Signature of the Insured