

COMPLAINTS FORM

In order to formally submit a complaint please complete the below mandatory fields prior to submitting a complaint. Please note that the Data provided by you should be accurate and precise in order to allow the Company to perform a full investigation of your claim and/or complaint.

The Company may request further information and/or clarifications and/or evidence as regards to your complaint.

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Name:

Surname:

CLIENT INFORMATION

ID or Passport Number:

Country of nationality:

Legal Entity Name (in case the Client is a legal

person):	
Trading Account Number:	
CONTACT DETAILS OF THE CLIENT	
Postal Address:	
City/Province:	
Code:	
Country:	
Telephone Number:	
Email:	
Please advise your most convenient method of	
communication:	



DETAILS OF THE COMPLAINT

Date when the Complaint was created:	
Employee who offered the services to the Client:	
Description of the Complaint: (use a separate sheet	t if necessary):