

2. Age:

Format For Filing Consumer Complaint

1. Name:

3. Address:	
4. Contact No.	5. E-mail Id:
6. Gender: Male/Female	
7. Category of the Complaint: (Please Tick)	
i. Complaint related to purchase of gii. Complaint for the negligence of se	
8. Sector to which the complaint relates- (I	Please tick one)
 Banking/ Financial services Online Shopping Insurance Retail Telecom Food/ Public Distribution Services Road/ Public Transport Electricity Water Medical/ Health Courier/ Postage Real Estate Petroleum/ LPG Local Bodies/ Other Government Department Other 	
Opposite Party's I 1. Name:	octans
2. Address:	
2. 1 xxxx 055.	
3. Contact No.:	4. Email:



GRAHAK SAHAYTA KENDRA 5. Full details of the complaint: (Please feel free to attach additional sheet, if required) 6. Documents Attached: (Please specify) 7. Relief/Remedy sought:

Date: Signature: