

If you have a claim to the product/service purchased at our retail stores, please fill out the Request for Complaint with an accurate description and your contact information. Our customer service department will do its best to answer without delay to the complaint and within timeline of eight days.

## REQUEST FOR COMPLAINT no. CSR - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

(CSR-PS code-year-complaint number)

Date of complaint submission: \_\_\_\_\_, time: \_\_\_\_\_, petrol station: \_\_\_\_\_

Complaint applicants' data, name and surname: \_\_\_\_\_

Contact number: \_\_\_\_\_, e-mail address: \_\_\_\_\_

(Home address, only if the customer does not have an e-mail address: \_\_\_\_\_)

Description of the purchased product - provided services:

\_\_\_\_\_

Date of purchase: \_\_\_\_\_, proof of purchase and its number (receipt copies, slip, etc.): \_\_\_\_\_

**Note – in accordance with Article 56 of the Consumer Protection Act, as a proof of purchase of the product/service, the Company will take into account payment with EKO SMILE loyalty card transaction. Please, enter your SMILE card number:**

\_\_\_\_\_

Description of the complaint to the product/service:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requested way of resolving complaint (choose the number):

1. replacement/repair of detected flaw of the product/service;
2. money refund /Smile points refund;
3. accuracy dispensers' check with glass measuring jug
4. other (please specify) \_\_\_\_\_

Objection note of the seller referring complaint: \_\_\_\_\_

\_\_\_\_\_

Signature of the customer

Signature of authorized person, stamp

### NOTICE OF PERSONAL DATA PROCESING:

Records of received complaints prescribed by the Law on Consumer Protection pursuant to Art. 56, manages our customer service electronically, as well as the PS Manager in the form of a book of complaints, strictly complying with the Personal Data Protection Act, and according to the notice on EKO petrol stations and our website.



### DECISION AND SOLUTION UPON COMPLAINT:

To be filled in by the authorized PS employees after receiving the information from the customer service, or when the complaint is resolved at the concerned PS and sent electronically via the customer service to further maintain the complete electronic records.

Decision upon complaint (underline): ACCEPTED / DECLINED

Decision date: \_\_\_\_\_ Date of resolving: \_\_\_\_\_  
(Extension of the deadline of resolving: \_\_\_\_\_)

Way of resolving: \_\_\_\_\_

Customers' signature: \_\_\_\_\_

Authorized persons' signature: \_\_\_\_\_

ID card number: \_\_\_\_\_

Stamp Place

**Note: customer fills out two Requests for Complaint, or receives a copy that will keep as a receipt of submitted complaint.**