



## Complaints Form

To  
T.C. ZIRAAT BANKASI A.S. – ATHENS CENTRAL BRANCH  
Customer Complaints Service  
Ermou 2, P.C. 10563, Athens  
Tel. :  
Fax :  
e-mail :

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Are you a customer of the Bank?

YES		NO	
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If you have answered yes to the previous question, please fill in all the necessary information<sup>1</sup>

Account Number	
CIF / Customer Code	
Name and Surname	
Title of the legal entity	
Name and surname of legal representative (for Legal entities)	
Address	
ID no	
Tax Identification Number	
Telephone number	

<sup>1</sup> In the event that you are not a customer of the Bank, fill in all the data available and note that the Bank will maintain and process your personal data as you provide it to us in accordance to the provisions in the General Data Protection Regulation (EU 2016/679). For more information, please contact us at [grdataprotection@ziraatbank.gr](mailto:grdataprotection@ziraatbank.gr)



# Ziraat Bankası

Please indicate with which bank service or product you have a complaint about

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Please describe your complaint in detail

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- I hereby declare the sending of my complaint for consideration
- I hereby declare that the information I mentioned above is accurate

Place / Branch

Date

Signature