**Complaint Update Request**

To: **T.C. Ziraat Bankasi A.S. – Athens Central Branch** Date : \_\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_

Re: Customer Complaints Service

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| Case number (as it was mentioned to you in the complaints receipt after submission) |  |
| 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 |  |

Please inform me regarding the course of the examination of the above-mentioned complaint that I have submitted.

**Name, Surname and Signature**

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