AXIS BANK

Date: _____ Branch: _____

COMPLAINT FORM (Principal Nodal Officer)

Customer name:

Account type: Savings ☐ Current ☐ Term deposit ☐ Demat ☐ Loan A/c ☐ Others ☐

Account number/Loan A/c no.:

Registered mobile no.: Landline no.:

Registered email ID: _____

Was the complaint lodged previously?: Yes ☐ No ☐

Date of previous complaint: D D M M Y Y Y Y Service request no:

Please enter a valid Service Request No. Please obtain a Service Request No. If you do not have one by following Step 1

Details of grievance/complaints: _____

_____

_____

_____

_____

_____

_____

Date: _____ Signature of the customer: _____

Please send this form, completely filled and signed to Mr. Parag Deshpande Senior Vice President -II
Axis Bank Ltd. 7th Floor, Axis House, Wadia International Center P.B. Marg, Worli, Mumbai – 400 025
Ph. 080-61865200. Timings: 9.30 am to 5.30 pm, Monday to Saturday, (except second and fourth Saturdays and Bank Holidays)

DECLARATION

I/We the complainant/s here declare that:

(a) The information furnished herein above is true and correct; and

(b) I/We have not concealed or misrepresented any fact stated in aforesaid columns and the documents submitted herewith

NEED HELP? CONTACT US:

Call us on: 18604195555 & 18605005555

Visit us at: axisbank.com/support