**Appendix 3**

**Luxury International Payment Systems, UAB**

**(“LuxPay”)**

**Customer Complaint Form**

(Appendix 3 of the Compliance Policy)

Please provide the following information for us to consider and investigate your grievance and take appropriate remedial action.

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| **1. Details of the Person(s) or Organisation(s) filing the Complaint (“the Complainant”).** |
| **Name:** ………………………………………………….**Address:** …………………………………………………………. | **Phone No:**  ………………………………………….**Email:** …………………………………………………………. |
| **Relationship with LuxPay …**…………………………………………………………………………………………. ……………………………………………………………………………………………………. |

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| **2. Please provide details of your complaint and attach additional sheets if required.** |
| **Complaint Details:** …………………………………………………………………………………………………………….……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |
| **Desired / Requested Outcome:**…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |
| **Attachments (if any):**1. ………………………………………………………………………………………………………………
2. ………………………………………………………………………………………………………………
3. ………………………………………………………………………………………………………………
 |
| **3. Submission of Complaint and LuxPay’ Complaints Handling Procedures.** |
| Please Confirm if you would like to receive a copy of LuxPay’ Complaints Handling Procedures (free of charge) by e-mail.  Yes No  |
| **4. Declaration and Signature** |
| **I certify that the information provided on this form is true and correct to the best of my knowledge.** |
| **Date:** ………………………………………………. | **Signature:** …………………………………………………………. |