

Appendix 1



Complaint Form

Your Details

Name*:

Address*:

Daytime telephone number*:

Email address:

Date issue/matter for concern arose*:

Name of Business Function / Area you dealt with:

Name of employee with whom you dealt:

Details of complaint*:

Signature

Date

* Denotes mandatory fields

Email this completed form to: complaints@sbc.gov.ie

or submit by Post to: **The Strategic Banking Corporation of Ireland, Treasury Dock, North Wall Quay, Dublin 1, D01 A9T8.**