

Date: _____



Branch: _____

GRIEVANCE FORM

Name of Customer:

Type of Account: Savings Current Term Deposit Demat Loan A/c Others

Account Number/ Loan A/c No:

Mobile No: Landline No:

Email:

Details of previous complaint lodged (if any): Yes No

Date of Previous Complaint: Service Request No:

Details of Grievance/Complaint: _____

Date: _____

Signature Of the Customer: _____

Please send this form, completely filled and signed, to Mr. Ashok Ramakrishnan, Nodal Officer - Grievance Redressal, Axis Bank Ltd, NPC1, 5th Floor, "Gigaplex", Plot No I.T.5, MIDC, Airoli Knowledge Park, Airoli, Navi Mumbai - 400 708. You may also email us the scanned image of the filled up form to nodal.officer@axisbank.com In case you are not satisfied with our resolution or if you do not receive a response within 30 days of approaching the bank, you may contact the Banking Ombudsman. the details of the banking Ombudsman Scheme 2006 and the addresses of the Banking Ombudsman offices are available in the Grievance Redressal Mechanism section of our website or at any of our branches.

Declaration

I/We, the complainant/s herein 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