



Date :
No. :
File No. :

(For official use only)

COMPLAINT FORM

Date :

I. APPLICANT'S :

Name-Surname :

Identity Card No. :

Permanent Address :

..... Tel/Fax No.

Business Address :

..... Tel/Fax No.

II. COMPLAINT:

Against which body/institution :

Responsible official in the
body/institution concerned :

Nature and the facts about
the decision or matter
which you complain :

.....

(Please continue at the back page.)

III. DECLARATION:

I undersigned, hereby declare that I have not filed any case before any Court and my complaint is not being investigated by the Attorney-General or the Police Organization. I also declare that my statements reflect the truth and if I file a case in the Courts, I will immediately inform the Office of the Ombudsman.

I kindly demand my complaint to be examined by the Office of the Ombudsman in the light of the laws in force and/or the Court decisions and the final report to be mailed to my address.

Signature:.....

IV. ATTACHMENTS:

1.

2.

3.