

GRIEVANCE REDRESSAL PROCEDURE

Application to Internal Grievance Redressal Cell - IGR

FORM A

Date

1. Name of the consumer

2. Full address of the consumer

Flat no./Building name

Lane/Street

Landmark

Suburb/City Pin Code

Phone no. Fax no.

Email

3. Account no.

4. Division

5. Nature of complaint _____

6. Disputed amount if any _____

7. Please attach correspondence with AEML in the said matter (if any) _____

8. Action taken by AEML in mitigating the grievance _____

9. Any other matter you would like to state regarding grievance redressal by AEML _____

Consumer's name in block letters _____ Signature _____