

Appendix-A

APPLICATION TO FORUM FOR REDRESSAL OF GRIEVANCE

Date _____

1. NAME OF THE CONSUMER _____
2. FULL ADDRESS OF THE CONSUMER _____
PIN CODE _____
PHONE NO. _____
FAX NO. _____
EMAIL ID _____
3. PARTICULARS OF CONNECTION AND CONSUMER No.
(Please state nature of connection)

4. DISTRIBUTION LICENSEE _____
5. DETAILS OF THE GRIEVANCE, FACTS GIVING RISE TO THE GRIEVANCE

(If space is not sufficient please enclose separate sheet)

6. DATE OF ORIGINAL INTIMATION OF GRIEVANCE BY THE CONSUMER TO THE DISTRIBUTION LICENSEE (INTERNAL GRIEVANCE, REDRESSAL CELL)

7. REMEDY PROVIDED BY THE DISTRIBUTION LICENSEE, IF ANY *(If remedy has been provided, please enclose relevant communication from the Distribution Licensee)*

8. NATURE OF RELIEF SOUGHT FROM THE FORUM

(Please enclose any proof to support claim, if any)

9. LIST OF DOCUMENTS ENCLOSED

(Please enclose copies of any relevant documents which support the facts giving rise to the Grievance)