

APPEAL FORM

TELECOM CONSUMER COMPLAINT REDRESSAL REGULATION 2012

Appeal under Regulation 9 Chapter 3 of the TELECOM CONSUMER COMPLAINT REDRESSAL REGULATION 2012

(Mention Name and Address of Service Provider)

Sr. No. 1	Name. Address, Telephone No, Fax No. and E-Mail address of the Appellant	
2	Telephone No. or Cellular Mobile No. or Broadband Connection Identity, as the case may be, for which appeal is filed	
3	Name of the city /district of the origin of Complaint	
4	Name of the State or licensed service area, as the case may be, of the origin of complaint.	
5.	Nature of Complaint (Specify, whether complaint relates to provisioning/Activation/Billing /Fault –Repair/Service disruption/ Disconnection of service/Value Added Service/Closure/Termination or specify if any other)	
6	Docket number allotted by Call Centre at the time of lodging complaint under sub regulation 1 of regulation 7 and date of lodging the complaint with Call Centre	
7	Statement of Facts relating to grievance (Attach separate sheet signed by Appellant if required)	
8	A full description of the matter which is the cause of the grievance including copies of any relevant and supporting documents, If any , and the relief claimed in Appeal. (attach separate sheet signed by Appellant if required).	
9	A statement to the effect that same subject matter or issue, for which an appeal has been filed under these regulations, is not covered in any proceedings before any court or tribunal or under Consumer Protection Act, 1986 (68 of 1986) or any other law for the time being in force.	
10	Details of any other relevant material or document	
11	Whether the Appellant requests to grant him exemption from appearing in person and decide the appeal on the basis of information, document or record filed by him.	

Form for Verification

I, _____ (Name in full and block letters), the appellant ,
son/daughter of _____ do hereby declare that to the best
of my knowledge and belief, the information given in this appeal and the annexure and statement
accompanying the appeal are correct , complete and truly stated

Signature of Appellant

(Name of Appellant)-----

(Specify status of the appellant, Whether a Company /Firm/Society/Individual/ others
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Note 1. Form of Appeal, grounds of appeal and Form of Verification appended shall be signed by the Appellant .

Note 2. The Appellant shall submit in duplicate the appeal in this Form.

