			L CO-OPERATIVE B	ANK LTD.	
1.	Branch Name :		Date :		
2.	Customer Details :				
	BCCB Customer Not a BCCB Customer				
	Name :				
	Address :				
~	Contact No.:	:			
3.	Account Details, if any		A/c No.:		
	Type of A/c : Contact No. :		Email :		
	Home Branch :				
4.	4. Product/Service about which you have complaint :				
5.	Brief details of your co	mplaint :			
6.	Attached Documents,	if any :			
7.	Declarations :			4 	
No. of Documents : I hereby declare that all information provided by me above is correct and true and I assume the full responsibility in case of invalidity of such information.					
			Signature of the Cu	stomer	
For Office Use Only					
Comp	laint Received By -				
Branc	h Code :	Emp. ID :	Emp. Name :		
Complaint Received On :			Action Taken On :		
Action Taken :					
			Signature with date :		
BALAGERIA CENTRAL CO-OPERATIVE BANK LTD. Acknowledgement Slip (Customer Copy) Name and Address of the Complainant :					

Complaint Received By :

5

Signature

Complaint Received On :