

Consumer Grievance Submission Form

Date: [Insert Date]

Your Name: [Insert Your Name]

Your Address: [Insert Your Address]

Email: [Insert Your Email]

Phone Number: [Insert Your Phone Number]

Details of the Grievance

Product/Service Name: [Insert Product/Service Name]

Purchase Date: [Insert Purchase Date]

Seller/Service Provider: [Insert Seller Name]

Description of Grievance

[Insert a detailed description of the grievance, including specific issues and any relevant facts.]

Resolution Sought

[Insert the resolution you are seeking, such as a refund, replacement, or other remedies.]

Attachments

[List any attached documents, such as receipts, warranty information, or correspondence.]

Thank you for addressing my grievance.

Sincerely,

[Your Name]