



For helping us to process you report more efficiently, please fill in this form clearly (if possible, using block capitals or in such a way that the information is perfectly legible).

Thank you for your cooperation in this matter.

Last name _____ Name _____

home address in

Street _____ no. _____

c/o (if applicable) _____ Place _____

province _____ post code _____ tel. _____ e-mail (mandatory)

This notification refers to:

to a report/suggestion

to a complaint

Date of the incident _____ Time of incident _____

Place _____

MESSAGE

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.....
.....
.....

Legible signature _____

N.B.

Please be advised that the data you have provided will be processed in accordance with Italian Presidential Decree 679/2016. Please also note that a response to your complaint will be sent to you by e-mail within 30 days from the date on which this form was recorded by us.