Complaint Form

*Consumer Compaint Portal*

*All Rights Reserved*

*@Durgesh Kothawade*

*@ Uday Brahmankar*

*In order to address your complaint, you must provide the following information:*

1. Name of the Person(s) or Organisation(s) filing the Complaint (“the Complainant”).

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1. Contact information of the Complainant (please include email address and phone number if possible).

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1. Is there a representative making this Complaint on behalf of the Complainant?

**Yes**

*(if yes, please provide the Name and Contact information of the Representative):*

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*Please attach proof that the Representative has been authorised by the Complainant to file the Complaint. For example, this can be in the form of a letter signed by the Complainant giving permission to the Representative to make the Complaint on his behalf.*

**No**

Is proof of authorisation included with the Complaint?

**Yes No**

1. Are you requesting that this Complaint be kept **confidential**? **Yes** *(if yes, please explain why you are requesting confidentiality)*

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**No**

1. Please provide the **name or a description of the EBRD Project** at issue.

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1. Please describe the **harm that has been caused or might be caused** by the Project *(please continue on a separate sheet if needed):*

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1. If you are requesting the PCM’s help through a **Problem-solving Initiative**, you must have made a genuine effort to contact the EBRD or Project Sponsor regarding the issues in this complaint.
   1. Have you **contacted the EBRD** to try to resolve the harm caused or expected to be caused by the Project?

**Yes** *(If yes, please list when the contact was made, how and with whom):*

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*Please also describe any response you may have received.*

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**No** *(please go to question 8)*

Is the written record of this contact with the EBRD attached to your complaint?

**Yes**

*(please list)*

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**No** *(if not, please arrange for all relevant documents to be delivered to the PCM Officer as soon as possible).*

* 1. Have you **contacted the Project Sponsor** to try to resolve the harm caused or expected to be caused by the Project?

**Yes**

*(if yes, please list when the contact was made, how and with whom)*

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*…………………………………………………………………………………………………………………………………………………………. Please also describe any response you may have received.*

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**No** *(please go to question 8)*

Is the written record of this contact with the Project Sponsor attached to your complaint?

**Yes**

*(please list)*

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**No** *(if not, please arrange for all relevant documents to be delivered to the PCM Officer as soon as possible).*

1. **If you have not contacted** the EBRD and/or Project Sponsor to try to resolve the harm or expected harm, please explain why.

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**Although not required, it would be helpful to the PCM if you could also include the following information:**

1. If you believe the EBRD may have failed to comply with its own policies, please describe which EBRD policies.

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1. Please describe any other complaints you may have made to try to address the issue(s) at question (for example, court cases or complaints to other bodies).

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1. Are you seeking a Compliance Review where the PCM would determine whether the EBRD has failed to comply with its Relevant Policies? **Yes No**
2. Are you seeking a Problem-solving Initiative where the PCM would help you to resolve a dispute or problem with the Project?" **Yes No**
3. What results do you hope to achieve by submitting this Complaint to the PCM?

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**Date:**

**Please send your Complaint to: Consumer Complaint Portal**

**Email:** [**dvkothawade12@gmail.com**](mailto:dvkothawade12@gmail.com)[**udaybrahmankar3421@gmail.com**](mailto:udaybrahmankar3421@gmail.com)

**Contact: 9767769937 , 8007926852**