THE RSCB BANK

FEEDBACK / GRIEVANCE FORM

1) DATE _____ 2) Base Branch Name _____

3) TYPE: - FEEDBACK ☐ SUGGESTION ☐ INFORMATION ☐ COMPLAINT ☐

4) CUSTOMER TYPE:- DOMESTIC ☐ NRI ☐ DEMAT ☐ NON-CUSTOMER ☐

5) A/C TYPE:- SAVINGS ☐ CURRENT ☐ TERM DEPOSIT ☐ DEMAT ☐ LOAN ☐ OTHER ☐

6) *ACCOUNT NUMBER ☐☐☐☐☐ ☐☐☐☐☐☐☐☐☐☐☐☐

7) DP ID (IN CASE OF DEMAT A/C). ☐☐☐☐☐☐☐☐ ☐☐☐☐☐☐☐☐

8) *PRODUCT SERVICE _____ 9) *SUB-TYPE _____

10) *NAME OF CUSTOMER ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

11) *ADDRESS: _____

_____ *City: _____ *PIN _____ *STATE _____

12) *E- MAIL _____

13) *MOBILE NO +91 ☐☐☐☐☐☐☐☐☐☐

LANDLINE NO ☐☐☐☐☐ ☐☐☐☐☐☐☐☐

14) BRIEF DETAILS OF GRIEVANCE/COMPLAINT

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SIGNATURE OF THE CUSTOMER / COMPLAINANT

DATE D D M M Y Y Y Y

Please send this form duly filled in & signed to the Branch/Regional Office/Zonal Office.
The Nodal Officer of Grievance Redressal, The Rajasthan State Co-Operative Bank Ltd. DC-1 Opp. Nehru Balodyan, Tonk Road,Jaipur-302015. Alternatively, you could also lodge your complaint through our website https://rscb.org.in/ & obtain tracker-id for complaint.

DECLARATION

I / We, the complainant/s herein declare that: (* Indicates MANDATORY field)

(A) the information furnished herein above is true and correct, and

(B) I / We have not concealed or misrepresented any fact stated in aforesaid columns and the documents submitted herewith