

Complaint Form



Personal Information

Name				CPR	
Residence Address					
Mailing Address					
E-mail Address					
Home Phone No.	Work Phone No.	Department	Extension		
Account No. (If Applicable)					
Complaint Directed Against (Branch Name)	Name of the person or persons you dealt with at the Bank				

Type of Financial Product my Complaint is about

<input type="checkbox"/> Current Account	<input type="checkbox"/> Credit Card	<input type="checkbox"/> ATM Services	<input type="checkbox"/> Debit Card	<input type="checkbox"/> Fees/Bills
<input type="checkbox"/> Personal Loan	<input type="checkbox"/> Call Centre Services	<input type="checkbox"/> Money Transfer Services	<input type="checkbox"/> Mortgage Loan	<input type="checkbox"/> Savings/Share Account
<input type="checkbox"/> Priority Banking	<input type="checkbox"/> Al Mumayaz Account	<input type="checkbox"/> Online Services	<input type="checkbox"/> Business Services	<input type="checkbox"/> Others: _____

Details of Complaint

Please list events in the order they happened. Attach additional pages if needed.

Reviewing documents often helps us understand important details of your complaint. Please attach copies of your statements, cancelled cheques, and correspondence of other documents that will help us review your complaint.

Always send copies. Never send original documents.

Please email your complaint to:

National Bank of Bahrain B.S.C.

P. O. Box 106, Manama, Kingdom of Bahrain

Tel: 17214433

Email: Complaint@nbbonline.com

Declaration

I hereby authorize the disclosure of any information regarding this complaint to the Central Bank of Bahrain or any other authorized company, agency or entity.

Signature

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Date DD | MM | YYYY

Complaint No.
(For Bank Use Only)

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Licensed by CBB as a conventional retail bank.

Closer to you