

Complaint form Zinnwald Lithium

reference numbe	er:				
first name:					
surname:		Note: we cannot reply to you if you:			
ymously	submit my complaint anon- my identity not be disclosed nsent	remain anonymous ordo not sign the pri- vacy policy.			
Contact da	ta				
Please contact m	e:				
□ by mail:					
☐ by phone:					
□ by email:					
preferred language for communication					
□ German					
☐ English (standa	ard, if nothing ticked)				



Description of the incident or complaint

What happened? Where did it happen? Who was affected? What are the consequences of the problem?

Add further pages if necessary	
Date of the incident or	complaint
☐ Single incident/complaint (Date:)
☐ Occurred several times (How often?)
☐ Ongoing (problem still exists)	



In my opinion, the following steps should be taken to solve the problem:

Add further pages if necessary	
☐ I have taken note of the privacy policy and a (the QR code will take you there).	accept it
Signature of the complainant to the privacy privacy if not anonymous:	policy
	Please send this form to:
	Zinnwald Lithium GmbH Zinnwalder Straße 15
Date:	01773 Altenberg
	or E-Mail: beschwerde@ zinnwaldlithium.de



To be filled in by Zinnwald Lithium GmbH:

Complaint received by:

•	-		
Name of the perso	n receiving the co	mplaint:	
position:			
signature:			
date:			
COPY:			
□ Complainant		□ Recipient	
☐ Complaints officer		☐ Archive copy	