



FORM TO SUBMIT A CLAIM

PERSONAL DETAILS FROM THE CONSUMER (To be completed with capital letters)

Name and surnames:	I.I.C./passport:	
Address:	Place:	
Postal Code:	Phone Number:	E-mail*:
<i>*With your e mail, you're allowing to establish this media with us.</i>		

Personal details from the establishment (Name, Tax ID Number and registered office, are required)

Business name:	Tax ID Number:	
Registered office:	Place:	Postal code:
Phone Number:	E-mail:	

Reason for complaint (if there is insufficient space, you could write in another white page).

REQUESTS THAT (To specify) .

ACCOMPANYING DOCUMENTS (Bill, evidence of shopping, contracts, mails...).

I agree to submit my claim to the OMIC for its intervention and mediation

Signature:

In Valladolid, of 20

DATES PROTECTED. In accordance with article 5 of Organic Law 3/2018, of Protection of Personal Data and Guarantee Of Digital Rights, you're informed about the treatment of yours personal details, also annoying documents; so, they will be included in the Card Index from the Valladolid's City Council, only for your claims. Personal Data will be treated confidentially and they could be transferred to the claimed establishment in this case. People interested could exercise rights from access, rectify, cancellation and opposition, with the expected effects in the same Law.

REASON FOR THE CLAIM (the explanation of the previous page continues).