



THE BANKS ASSOCIATION OF TURKEY CUSTOMER COMPLAINTS ARBITRATION PANEL APPLICATION FORM (*)

Please read the Banks Association of Turkey, Customer Complaints Arbitration Panel Brochure carefully before filling in the application form.

If you sign this application form in the name of the applicant's attorney/representative, you must absolutely submit a copy of your power of attorney or a document proving that you are authorized to act for and on behalf of the complainant. The letter of attorney should be issued by a notary public and clearly indicate that you are authorized to make an application to the Banks Association of Turkey, Private Customer Arbitration Panel (Arbitration Panel). If such documents are not submitted, your application will not be processed. Please contact the Banks Association of Turkey for your queries.

Informative Note on the Law on Protection of Personal Data

Your personal data provided with your application to the Arbitration Panel will be non-automatically registered at the Association's data storage system to evaluate and resolve your application based on the legal grounds of "being required for the data recipient to fulfil its legal obligations" and "data processing being required to the legal benefit of the data recipient without violating the basic rights and liberties of the data provider" in Article 5 of Law No. 6698 on Protection of Personal Data. Name, Turkish ID, contact data and other personal data required for evaluation of the application will be shared with member banks, members of the Arbitration Panel, Banking Regulation & Supervision Agency, call center, IT company which offers technical assistance services to the Association, company which offers storage services and, if provided through e-Government, Turksat A.Ş. If your application is related with credit or debit cards, your data will be shared with Bankalararası Kart Merkezi A.Ş. which will be a member of the Arbitration Panel as per the applicable regulations.

Your requests regarding Article 11 of the Law which regulates "the rights of the relevant person" can be made to Nispetiye Caddesi Akmerkez B3 Kule Kat:13 34340 Etiler / İSTANBUL as per the "Communiqué on Methods & Principles on Applications to the Data Officer".

Address: Nispetiye Caddesi Akmerkez B3 Blok Kat 13 34340 Etiler Beşiktaş İSTANBUL

Call center telephone number: 0 850 222 2 822

Fax: (212) 282 09 46

E-mail: hakemheyeti@tbb.org.tr

Web site: <http://www.tbb.org.tr>

(*): Created based on the Communiqué on Composition and Operation Principles and Procedures of Customer Complaints Arbitration Panel dated May 14, 2013.

PERSONAL INFORMATION IF THE APPLICANT IS A REAL PERSON (PLEASE USE CAPITAL LETTERS)

NAME AND SURNAME:

TURKISH ID NUMBER(IF ANY):

Informative Note on the Law 6698 on Protection of Personal Data:

If you choose "e-mail" as the preferred method of communication in your application to the Association for the Private Customer Arbitration Panel, personal data in your e-mail may be transferred abroad if the e-mail server is abroad. You will continue to be communicated via e-mail in case of your "open consent for transfer of your personal data abroad" as per Law No. 6698 on Protection of Personal Data.

Consent Note on the Law 6698 on Protection of Personal Data:

In my application to the Association for the Private Customer Arbitration Panel, I select the preferred method of communication and I give my consent for transfer of personal data in e-mail messages abroad as per Law No. 6698 on Protection of Personal Data.

PREFERRED METHOD OF CONTACT: **E-MAIL** **MAIL ADDRESS:**

STREET: **NO:**

POST CODE: **CITY:**

TELEPHONE:

E-MAIL:

(If you provide e-mail address, you can follow up using the tracking system.)

CONTACT INFORMATION OF THE ATTORNEY IN CASE OF AN APPLICATION VIA ATTORNEY (PLEASE USE CAPITAL LETTERS)

NAME AND SURNAME:

STREET:..... **NO:**

POST CODE:..... **CITY:**

TELEPHONE:.....

E-MAIL:

BANK RELATED WITH THE APPLICATION:

HAVE YOU APPLIED TO THE RELEVANT BRANCH / BANK HEADQUARTERS?

YES **NO** **IF YES, WHEN?**/...../.....

HAVE YOU RECEIVED A RESPONSE FROM THE BANK'S BRANCH / HEADQUARTERS?

(Applications which do not include the date of response by the bank's headquarters or branch or made after sixty days after the date of response are not accepted.) **YES** **NO**

IF YOUR ANSWER IS YES, WHAT IS THE DATE OF RESPONSE BY THE BANK?:

...../...../..... (Please attach a copy of the bank's response.)

WHAT IS THE DATE OF OCCURRENCE OF THE INCIDENT RESULTING WITH THE APPLICATION?:

...../...../.....

(Applications made to the Arbitration Panel after 2 years following the date of incident or transaction are not accepted.)

HAS THE COMPLAINT EVENT BEEN REFERRED TO COURTS?

(Applications which are submitted to a court are not accepted.) **YES** **NO**

IS YOUR APPLICATION RELATED TO A RETAIL OR INDIVIDUAL TRANSACTION?

(Applications arising out of banking transactions which are related to commercial, agricultural, etc. issues and are not retail or individual by nature and which are filed by legal entities are not accepted..) **YES** **NO**

IS YOUR APPLICATION RELATED WITH A GENERAL ISSUE REGARDING BANKS AND THE SERVICES THEY OFFER?

(Applications related to a general matter about personnel of banks or about products and services offered by banks are not accepted.) **YES** **NO**

IS YOUR APPLICATION RELATED WITH A BANK SUBJECT TO A DECREE OF BANKRUPTCY OR LIQUIDATION?

(Applications related to decisions taken by a bank adjudged bankrupt or decided to be liquidated are not accepted.) **YES** **NO**

IS YOUR APPLICATION RELATED TO ACTS CLASSIFIED AS A CRIME IN THE APPLICABLE LAWS?

(Applications related with a criminal act are not accepted.)
YES **NO**

IS YOUR APPLICATION RELATED WITH A POSSIBLE TRANSACTION WHICH IS AT THE OFFER OR EVALUATION PHASE UNDER THE BANK'S PRICING POLICY AND NOT YET EXECUTED?

(Applications related with a possible transaction which is at the offer or evaluation phase under the bank's pricing policy and not yet realized are not accepted.)
YES **NO**

IS YOUR APPLICATION RELATED WITH AN INCIDENT WHICH HAS ALREADY BEEN REVIEWED AND RESOLVED BY THE ARBITRATION PANEL?

(Applications related with an incident which has been previously discussed and resolved by the Arbitration Panel are not accepted.)
YES **NO**

IS YOUR APPLICATION RELATED WITH AN INCIDENT WHICH HAS ALREADY BEEN RESOLVED BY THE BANK?

(With your right to object reserved, applications related with an incident resolved by the bank are not accepted.)
YES **NO**

BRIEF EXPLANATION OF THE APPLICATION (Please provide a brief explanation of the issue. Provide clear and objective information including date and the amount requested as compensation, if any.):

CLAIM (Please indicate the amount requested as compensation, if any.):

(In case of the lack of clear and objective information on the transaction or the claim, additional documents or information may be requested from the applicant. In such case, time of resolution will be delayed.)

If you need more space, please continue on an additional white paper and send it with this form.

(Please read the next page of the form.)

Please list all documents you consider to be relevant to the application below and attach them (their copies) to this form. Provide information on the number of pages below for each attached document.

As per the Law on Protection of Personal Data, the Association may process your personal data solely for the purposes of review and evaluation of this application and we kindly remind you not to shares any personal data not related with your application (photos, personal data on third parties... etc.) as well as private information (based on ID card; religion, ethnicity, blood type, medical data, criminal data, security measures (Criminal Registry), association/foundation/labor union membership ... etc.).

	<u>Number of Pages</u>
1.
2.
3.
4.
5.
6.
7.
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9.
10.

Please read carefully and sign.

(PLEASE USE CAPITAL LETTERS)

DECLARATION

- I declare that the information provided above are accurate.
- I hereby give my consent to the transfer of my application form and its annexes to the relevant bank and the transfer of any additional documents and information required by the Arbitration Panel and/or its secretary for review and evaluation of my application to the Association by the relevant bank.
- I hereby declare that the subject matter of this application to the Arbitration Panel is not subject to any court, arbitration office or Consumer Arbitration Panel.
- I hereby accept to notify the Banks Association of Turkey if I choose to make an application to a court, arbitration office or Consumer Arbitration Panel after the notification of the Arbitration Panel's resolution to me.

NAME & SURNAME

SIGNATURE:

DATE:

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...../...../.....