

Form of Complaint  
Center of Fair Trade complaint  
Department of Internal Trade

Date.....Month.....Year.....Time.....

Name[Mr./Mrs./Ms.].....Age.....

Nationality.....Passport.....

Homeaddress.....

E-mail address.....

Complaint on cause of.....

1. Company/Manufacturer Name.....

Address/Location [in detail].....

2. Date of Incident.....Time.....

3. Cause[s] of Complaint

- No tag exhibiting retail price
- Sale price is higher than controlled price
- Sale price is higher than exhibiting tag
- Sale price is higher than market price
- Unreasonably refuse to sell goods
- Hoarding of products
- Other [specify details].....

4. Details of complaint.....

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