

Complaint Form Related to BDL Circ # 158

Date:

Customer Full Name:

Branch:

Account Number:

Phone/Mobile Number:

Address:

City:

Street:

Building:

Floor:

Near:

E-mail:

Complaint Type

- Eligibility Criteria
- Eligible Amount
- Related Documentation
- Timeliness of Service
- Transparency
- Other

Complaint Details:

All fields are mandatory in order to process the complaint.

Please place this form in the envelope provided along with a copy of the relevant documents, if any, then drop the envelope in the Suggestions Box.

Kindly note that our response time shall not exceed 15 days from the complaint reception date.

You can also send your complaint or follow it up at the e-mail address complaints.management@arabbank.com.lb.

البنك العربي
ARAB BANK



Beginnings never end