

*Date of application: Competent Authority:Taichung City Government

Complainant's information

*Name: _____ Identity: ☐Native ☐Foreigner ☐Resident of China

*Birthdate: _____ Gender: ☐ Male ☐ Female ☐ Other

*Mailing address:

*Contact number:

Email:

In accordance with the handling procedures for consumer dispute appeals, this sheet will be provided to the trader, who knows the personal data, the reasons for the complaint and the request of the complainant (and the agent) in order to facilitate the dealing process of the authority and the trader's solution,. Complainant should fill in the following options.

*☐ Agree ☐ Disagree Provide attachment information to business operators

*Please select one way to contact the Trader and complainant (agent):

*☐Contact number ☐Email ☐Mailing address

The complainant's failure to select the options, would be deemed as receiving authorization of the competent authority to resolve the dispute without any objection.

Signature: 【 】

Agent

Name:

Mailing address:

Contact number:

Email:

Gender: ☐ Male ☐ Female ☐ Other

Type: ☐ Appointed agent ☐ Legal representative

Trader * At least one to be specified.

*Name:

*Address:

Branch:

Telephone:

***Name:**

***Address:**

Branch:

Telephone:

***Name:**

***Address:**

Branch:

Telephone:

Payment method	<input type="checkbox"/> Cash <input type="checkbox"/> Credit card <input type="checkbox"/> Check <input type="checkbox"/> Other:
Payment situation	<input type="checkbox"/> Pay off <input type="checkbox"/> Installment <input type="checkbox"/> Other:
※Place of consumption relationship (County/City) :	
*The reasons for the complaint (within 600 words) 【this sheet will be provided to the trader】	
<div style="border: 1px solid black; height: 100px;"></div>	
*Claim 【The desired solution】 such as rescind or terminate the contract, refund, compensation.....(within 400 words)	
<div style="border: 1px solid black; height: 100px;"></div>	
<p>1If the complainant is a minor, the complaint shall be filed by his/her legal representative on behalf of him/her. Please also specify the representative's name, gender, date of birth, address and Tel. No. The agent appointed by the complainant, if any, shall also be specified.</p> <p>2Please complete the Form and attach photocopies of the related information and documents hereto, and submit the same to Consumer Service Center of Taichung City Government (Wenxin Building 10F, No. 99, Sec. 3, Taiwan Blvd., Xitun Dist., Taichung City) in person, or via fax (04-22259509) or mail.</p> <p>3The complainant may also apply for resolution of the dispute on line with the consumer protection website of Executive Yuan (https://appeal.cpc.ey.gov.tw/WWW/Default.aspx) .</p>	
Signature: 【	