

COMPLAINT FORM

Please provide us with your particulars so that we can verify your identity in order to process this request.

1.	Complainant name (in full)	
2.	Designation	Mr./ Ms./ Miss/ Dr/ Others: (Please Specify)
3.	Your residential/ mailing address	
4.	Your contact details	Contact No.: Fax No.: Email Address:
5.	Your NRIC No./Passport No.	(please attach a copy of your NRIC or Passport for verification)
6.	Your 16-digit IKEA FAMILY or småles membership number (if applicable)	(please attach a copy of your membership card for verification)
7.	Please state the nature of your relationship with Ikano Handel Sdn Bhd	<input type="checkbox"/> A current /former customer <input type="checkbox"/> A current/ former employee <input type="checkbox"/> A current/ former vendor/ supplier/ distributor/ business partner/ service provider <input type="checkbox"/> Other (specify) _____ <i>* tick and/or delete where applicable</i>
8.	Party complained against (If possible, please identify the party by whom the act or practice in question was done or engaged in)	
9.	Please state the nature of your complaint (State clearly how, when, by whom and which of your personal data was collected, used, disclosed or processed)	

10.	Please list down any supporting documents or evidence provided (if any)	
11.	Do you consent to the disclosure of your identity to the party complained against?	<input type="checkbox"/> Yes <input type="checkbox"/> No (Please tick one of the following boxes)
12.	Please sign this form, check the information you have provided, then send this form together with the supporting documents to the DPO	<input type="checkbox"/> By ticking this box, I hereby declare and confirm that all information and supporting documents provided by me in connection with this complaint are true, accurate and complete. I understand that it will be necessary for Ikano Handel Sdn Bhd to verify my identity and that Ikano Handel Sdn Bhd may contact me for more detailed information in order to clarify or respond to any matters regarding my complaint. I consent to the collection, use and disclosure of the personal data that I have provided in this form for the purpose of investigating, responding to and dealing with this complaint. Date : _____

Important Notes:

- (1) Please note that Ikano Handel Sdn Bhd reserves the right to refuse to comply with your Data Correction Request as may be permitted under the Personal Data Protection Act 2010. To process this request, the information in this form may need to be given to third party service providers to Ikano Handel Sdn Bhd.
- (2) Personal data collected on this form is required to enable your Complaint to be processed, and will only be used in connection with such request.

For official use only:

Received by : _____ Date : _____

Case Number:

Remarks :

