

VİZE 2 WIND POWER PROJECT

GRIEVANCE / OPINION FORM

INFORMATION ABOUT THE PERSON THAT SUBMITTED THE GRIEVANCE AND/OR OPINION
(Please leave this area blank if you do not wish to give your name. Your grievance/opinion will be evaluated by Karayel Elektrik Üretim A.Ş.)

Full name:

Date:.....

Contact Information: (Please provide the necessary information about how you want to be contacted)

By post:.....

By phone

By e-mail:.....

State your purpose:

☐ Opinion ☐ Grievance

YOUR COMMENTS ABOUT THE PROJECT (Continue from the back of the page if necessary))

INFORMATION ABOUT YOUR COMPLAINT

Describe your complaint (Continue from the back of the page if necessary)

Date of Incident Related to Complaint

- ☐ One-time incident / complaint (specify Date).....
- ☐ Happened more than once (how many times?).....
- ☐ Ongoing (problem still persists)

What would you suggest to solve the problem? (Continue from the back of the page if necessary)

This part will be filled by Karayel Elektrik Üretim A.Ş.

OPINION STATUS:

Opinion Recorded (Y/N) :

Need Response (Y/N) :

Presentation Date :

Date of Response :

Recorded by :

GRIEVANCE STATUS:

Grievance Recorded (Y/N) :

Need Response (Y/N) :

Presentation Date :

Date of Response :

Recorded by :

Closing Date and Signature: