

Ireland State Savings - Customer Complaint Form for Prize Bonds only

PANEL A	PERSONAL DETAILS	
Title*	First Name* Surname*	
Address (BLOCK CAPITALS)*		
	Eircode	
Contact Teleph	one Number* Email Address	
Signature*	Date*	
Signatur 5	ignature DDMMYYYY	
PANEL B	IRELAND STATE SAVINGS - service to which the complaint relates (please tick relevant	ant box below)
	Deceased Account Inquiries New Purchases Other Please specify	
Repayments Deceased Account Inquiries New Purchases Other Please specify Customer Account Number (if known)		
(i) (ii)		
Prize Bond Nu		
(i)	(ii) (iii) (iii)	
PANEL C PLEASE SPECIFY THE DETAILS OF YOUR COMPLAINT		
(if you need more space please write overleaf or attach more paper with your comments)		
		
Data Protection Notice – General Data Protection Regulation Update		
Please note that by providing information, which includes personal data, to Ireland State Savings through this Customer Complaint Form, you are consenting to the processing of such personal data in accordance with our Complaints Procedure and the General Data Protection Regulation (GDPR).		
While you may withdraw your consent at any time by contacting Ireland State Savings FREEPOST, Prize Bonds, Fexco Centre, Killorglin, Co. Kerry, V93		
	not be possible for us to fully process your complaint if you withdraw your consent. For further information pl the Ireland State Savings Terms and Conditions as relevant, which are available at statesavings.ie	ease refer to our Complaints
FOR OFFIC	IAL USE ONLY	
Case Ref No	Channel received:	Date recorded
	Counters Mail Web	DDMM YYYY
		Date Issued
Assigned to		DD MM YYYY
Acknowledgen		Date Issued
Interim respon	Se	DD MM YYYY
		Date Final Response issued
Investigation		D D MM Y Y Y Y
complete		