

Enquiry reference number: (Office use only)
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APPLICATION FORM

Please read the 'Information for Customers' Guidance document before completing this form.

Applications can only be accepted after you have given the communications provider a period of at least **8 weeks** in which to address your complaint, or at any time after the provider communicates to you that they have reached deadlock.

If you require assistance in completing this form please contact CISAS on 0207 520 3814 or refer to our website <http://www.cisas.org.uk/>

1. ACCOUNT DETAILS

Which provider does your claim relate to?	
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Account holder name:	
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Mobile / Landline number(s):	
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Account Number(s):	
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Have you raised your complaint with the communications provider directly?	<input type="radio"/> Yes	<input type="radio"/> No
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Has 8 weeks elapsed since you made your complaint?	<input type="radio"/> Yes	<input type="radio"/> No
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On what date did you first complain to the provider?	
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2. DEADLOCK LETTER

The communications provider may have sent you a letter or email headed 'written notice', 'final response' or 'deadlock letter'. A deadlock letter is a communication from the provider that tells you that you have reached the end of their complaints procedure and that the dispute cannot be resolved.

Have you received a deadlock letter?	<input type="radio"/> Yes	<input type="radio"/> No
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What is the date on the deadlock letter (if received)?	
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What is the reference number on the deadlock letter?

Did the deadlock letter mention CISAS? Yes No

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3. HOW DID YOU FIND OUT ABOUT CISAS?

How did you hear about CISAS? Please select one option:

- CISAS Website Provider Ofcom Online Forum Social Media
 Other (Please specify)

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4. CUSTOMER DETAILS

Please provide your full contact details. If your account with the provider is held under a different name (e.g. married name) please provide those details.

Full name:	<input type="text"/>		
Organisation (if applicable)	<input type="text"/>		
Street Address:	<input type="text"/>		
Town:	<input type="text"/>		
County:	<input type="text"/>	Post code:	<input type="text"/>
E-mail address:	<input type="text"/>	Tel:	<input type="text"/>

If you provide an e-mail address we will send you information by e-mail only.

5. REPRESENTATION

You may elect to have a representative act for you (at your own cost). If you choose to do this, please provide their full contact details below.

Full name:	<input type="text"/>		
Organisation (if applicable)	<input type="text"/>		
Street Address:	<input type="text"/>		
Town:	<input type="text"/>		
County:	<input type="text"/>	Post code:	<input type="text"/>
E-mail address:	<input type="text"/>	Tel:	<input type="text"/>

To be signed by the applicant named in section 4.

I hereby give my authority for the above named person to represent me:

Print name:

Signature:

Date:

6. DISPUTE DETAILS

Please provide the details of the issues you have experienced.

Please ensure that you:

- Provide as much relevant detail as you can;
- Ensure you provide evidence, written or otherwise, that supports your claim;
- Use additional pages if required.

This is your opportunity to submit a fully detailed written claim and provide supporting evidence. You **cannot** make additional claims or submit further evidence at a later date.

6.1. The Contract

Please tell us what goods and services, provided or not provided by the provider this dispute relates to (e.g. broadband, mobile phone, VoIP):

6.2. Issues in Dispute

Tell us what services or actions you are in dispute with the provider about
(Please continue on separate sheets if required):

7. REDRESS SOUGHT

Please provide details of the services, compensation or other actions that you would like the adjudicator to direct the provider to provide or undertake.

7.1. Give you a product or service: Yes No

Please provide details of the product and / or service you are seeking:

7.2. Take some action: Yes No

What action would you like to be taken?

7.3. Give an apology: Yes No

Please provide details of the apology you are seeking:

7.4. Pay you compensation: Yes No

You must specify the total amount claimed in this section if you are asking the adjudicator to direct the provider to pay you in compensation.

The maximum amount you can claim is £10,000.

You must provide evidence to justify the amount claimed and you cannot change the amount at a later date.

Item	Amount Claimed (£)

Please continue on a separate sheet if required but ensure that the total amount you are claiming is completed in the next box below.

Total Claimed:

8. EVIDENCE

In order to prove your claim you should submit documentation that supports your position. Please tick all the relevant boxes below for each category of supporting evidence you are enclosing with your application. Where possible your evidence should be submitted in chronological order.

I will provide the following evidence:

- A copy of the agreement or contract I had with the provider.
- Invoices and/or receipts for the cost of the product and/or service.
- Letters and/or email communications with the provider.
- Photographs.
- Price schedules.
- Receipts for all expenses you wish to claim for.
- Recordings (Audio).
- Screen shots of the provider's website.
- Screen shots of other websites (Consumer forums etc.).
- Terms & Conditions of the provider.
- Video evidence.
- Other evidence (please specify)

As part of the adjudication process, a copy of your application and all submitted evidence will be sent to the communications provider concerned in order that they may respond to the claims you have made and submit their own evidence in defence.

9. CUSTOMER'S DECLARATION

Please read these declarations and tick **all three boxes** to confirm you understand them before signing this form.

I have read and understood the guidance notes provided with the application form.

I have not previously referred this dispute to a court of law.

I have tried to resolve this matter through the provider's own complaints procedure.

Print name: _____

Your signature: _____

Date: _____

Now please submit your application and supporting evidence to us:

By post:

CISAS
70 Fleet Street
London
EC4Y 1EU

By email: info@cisas.org.uk

Via the website: www.cisas.org.uk

By fax: 0845 1308 117