|  |  |  |
| --- | --- | --- |
| **Reference No:** | | |
| **Full Name and Surname:**  *(you can remain* ***anonymous*** *if you prefer or request not to disclose your identity to the third parties without your consent)* |  | |
| **Contact information:**  Please mark how you wish to be contacted (mail, telephone, e-mail) | * **By Post:** (Please provide postal address)   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   * **By phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * **By e-mail:** | |
|  | | |
| **Preferred language of communication:** | * Macedonian * Albanian * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Description of incident/grievance:** What happened? Where did it happen? Who did it happen to? What is the result of the problem? | | |
| **Date of incident/grievance:** | * One-time incident/grievance (date \_\_\_\_\_\_\_\_\_\_\_\_ ) * Happened more than once/how many times? (\_\_\_\_\_\_) * On-going/currently experiencing problem | |
|  | | |
| **What would you like to see happen to resolve the problem?** | | |
|  | | |
| Signature: | | Date: |
| Please return this form to:  Office of General Manager and  Julija Simjanovska – Environmental  email: [contact@elem.com.mk](mailto:contact@elem.com.mk);  [julija.v.simjanovska@elem.com.mk](mailto:julija.v.simjanovska@elem.com.mk) (in cc)  Tel/Fax: + 389 (0)2 3149 121 | | Address: Elektrani na Severna Makedonija  ul. 11 Oktovmri 9, 1000 Skopje  Republic of North Macedonia |