

STATE BANK OF INDIA - CUSTOMER COMPLAINT FORM

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| Customer Type | Existing SBI Customer <input type="checkbox"/> | Not a SBI Customer <input type="checkbox"/> |
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|---|--|------------|--|
| NAME | | ACCOUNT NO | |
| BRANCH | | STATE | |
| ADDRESS | | | |
| Email | | | |
| Telephone No | | Mobile No | |
| Product / Service about which you have complaint: | | | |
| Nature of Complaint | | | |
| Please give brief details of your complaint | | | |