COMPLAINT FORM TO THE SERVICE PROVIDER

COAS CONSORZIO ASTIGIANO

Villanova d'Asti

Ufficio Reclami

14019

Via alla Stazione 29

	ltaly			
	reclami@consorziocoas	it		
Details of complainant	and the second s			
Name:	Surname:			
Name (if not a natural person):				
Address:				
Postcode: City:	Country:			
E-mail:				
Telephone (optional):				
Details of user (if other than the complainant) and an	other passengers			
Name:	Surname:			
Details of journey				
Travel agent/tour operator/ticket vendor (if applicable):				
Reservation code/ticket number:				
Terminal/stop of departure:	Terminal/stop of arrival:			
Scheduled time of departure:	- hour: da	ate(dd/mm/yy):		
Actual time of departure (where not coinciding with the scheduled time) - hour:				
Line (if applicable):				

Grounds of complaint for regular services where the scheduled distance is 250 km or more. Please tide appropriate next to the relevant entries (*)	ick as
☐ Ticket issue/Discriminatory tariff or contract conditions	
☐ Rights of disabled persons or persons with reduced mobility	
☐ Information in case of cancellation or delay in departure	
Assistance at terminals in case of cancellation or delay in departure	
Re-routing or reimbursement in case of cancellation, delay in departure or overbooking	
☐ Travel information	
☐ Information on passengers' rights	
☐ Difficulty in the submission of the complaint	
Other:	
Choose how you wish to receive compensation/reimbursement, if due:	
O Vouchers or other services	
(please specify the procedures laid down by the service propayment in cash in accordance with applicable legislation	
)
Grounds of complaint for regular services where the scheduled distance is less than 250 km. Please t)
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(*) You can specify one or more reasons of complaint. For information on the rights of bus and coach passengers under Regulation (EU) No. 181/2011, please refer to the website of the Transport Regulation Authority at the following link:

https://www.autorita-trasporti.it/passengers-rights-trasporto-con-autobus/?lang=en
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Description. Please describe the events with respect to all items with a tick mark		
Annexes		
Proxy and user identity document (in case the complaint is submitted by a person other than the user) Other attachments:		
SIGNATURE OF TH	HE COMPLAINANT:	
Place		Date:
Place:		Date.
PRIVACY STATEM	MENT	

Privacy disclaimer

The data controller is COAS Consorzio Astigiano

Personal data is collected in order to manage complaints, proposals, suggestions, information and contacts to facilitate the mobility of people.

The legal basis of the processing is the consent expressed with positive action pursuant to art. 6 par. 1 letter a) of EU Regulation 2016/679. Personal data will be processed by those authorized to process it and may be communicated to the competent Public Administration on the subject. COAS has no intention of transferring data to a third country or to an international organization.

Personal data will be kept for 10 years from the opening of the file (ordinary prescription); in the event of a judicial dispute, they will be retained until the judgment becomes final for all degrees of judgment provided for by the applicable judicial system