COMPLAINT FORM TO THE SERVICE PROVIDER



LIROSI AUTOSERVIZI S.R.L.

S.S. 111 n. 62 89013 Gioia Tauro (RC) P.IVA 00246310809 reclami@lirosiautoservizi.com

Name:		Surname:				
Name (if not a natural per	rson):					
Address:						
Postcode:	City:		Country:			
E-mail:						
Telephone (optional):						
Details of user (if other than the complainant) and any other passengers						
Name:		Surname:				
Name:		Surname:				
Name:		Surname:				
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:		date(dd/mm/yy):		
Actual time of departure	eduled time) - hour:		date(dd/mm/yy):			
Line (if applicable):						

Details of complainant

appropriate next to the relevant entries (*)					
☐ 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 provider for the payment in cash in accordance with applicable legislation)					
Grounds of complaint for regular services where the scheduled distance is less than 250 km. Please tick as appropriate next to the relevant entries (*)					
☐ Discriminatory tariff or contract conditions					
☐ Rights of disabled persons or persons with reduced mobility					
☐ Travel information					
☐ Information on passengers' rights					
☐ Difficulty in the submission of the complaint					
☐ Other:					
Choose how you wish to receive compensation/reimbursement, if due:					
choose now you wish to receive compensation/reimbursement, if due.					
Vouchers or other services					

Grounds of complaint for regular services where the scheduled distance is 250 km or more. Please tick as

The service provider may supplement the list with any additional business-relevant items.

(*) 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:

Description. Please describe the events with respect to all items with a tick mark					
Annexes					
Proxy and user identity docume Other attachments:	nt (in case the complaint is submitted by a person other than the user)				
Place:	Date:				