



Annex 1: Project Grievance Form

Reference No:	
Full Name and Surname: <i>(You can remain <u>anonymous</u> if you prefer or request not to disclose your identity to the third parties without your consent)</i>	
Contact information: Please mark how you wish to be contacted (mail, telephone, e-mail)	<ul style="list-style-type: none"> • By Post: (Please provide postal address) _____ • By phone: _____ • By e-mail: _____
Preferred language of communication:	Macedonian Other: _____
Description of incident/grievance/complaint: 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? Other comments?	
Signature:	Date:
Please return this form to: Ms. Bisera Denkovska email: bisera.denkovska@mepso.com.mk tel. + 389 2 314 98 14 www.mepso.com.mk	Address: Electricity Transmission System Operator of the Republic of North Macedonia (MEPSO) ul. Maksim Gorki br. 4, 1000 Skopje Republic of North Macedonia