COMPLAINT FORM



Autolinee Federico

Via Lagani snc C.da Bovetto 89067 Reggio Calabria

Data of the person making the complaint				
First name:	Surname:			
Name (if not phisycal person):				
Address:				
ZIP code: City:	N	ation:		
E-mail:				
Telephone number (optional):				
Data of the user (if different from the person making the complaint) and of any other				
First name:	Surname:			
First name:	Surname:			
First name:	Surname:			
First name:	Surname:			
Trip Details:				
Travel agent/tour operator/ticket seller (if applicable):				
Booking code/ Ticket number:				
Departure Station/Stop:	Arrival Station/Stop:			
Scheduled departure time: - Hour:		Date:		
Scheduled departure time: - Hour:		Date:		

Actual departure time (Where not coinciding with the scheduled time)			
Line (If applicable)			
Line (ii applicable)			
Reasons for complaint for regular services of distance equal to or greater than 250 km. Please place a check next to the relevant entries.			
 Ticket issuing / Contractual conditions or discriminatory fares 			
 Rights of people with disabilities or reduced mobility 			
 Information in case of cancellation or delay in departure 			
 Assistance at the station in case of cancellation or delay in departure 			
 Alternative transportation or refund in case of cancellation, delayed 			
departure or overbooking			
Travel information			
 Information on passenger rights 			
 Difficulty in submitting the complaint 			
Other			
o other			
Select how you want to request compensation/refund if due:			
 Coupons or other services 			
 Specify other methods 			
provided by the company, in compliance with the regulations.			

Reasons for complaint for regular services less than 250 km away. Please place a check next to the relevant entries.

0	Discriminatory contractual conditions or tar	iffs	
0	Rights of people with disabilities or reduced mobility		
0	Travel information		
0	Information on passenger rights		
0	Difficulty in submitting the complaint		
0	Other		
Select how you want to request compensation/refund if due:			
0	Coupons or other services		
0		Specify other methods	
	provided by the company, in compliance with the regulations.		

^{*} You can indicate one or more reasons for the complaint. For information on the rights of passengers of bus transport services recognized by Regulation (EU) no. 181/2011, it is possible to consult the website of the transport regulation authority at: https://www.autorita-trasporti.it/tutela-diritti-dei-passeggeri-trasporto-su-autobus/

Please describe what happened with regard to all items for w mark	hich you have placed a check
Attachments	
Signature of the person making the complaint:	
Place:	Date: