



1 **Complaint: Toll Collect invoice**

- 2 Please complete this form on a computer. If you do not have access to a computer, please write in clearly legible block capitals. Mark applicable boxes. You must complete all boxes marked with an asterisk (*).
- 3 Customer data
- 4 User ID
- 5 Company name, legal form as entered in Commercial Register
- 6 House number, street
- 7 Postcode
- 8 City
- 9 Country
- 10 Contact (surname, forename)
- 11 Telephone
(please include country code and area code)
- 12 Details of the Toll Collect invoice
- 14 Invoice number *
- 15 Item No./Designation
- 16 Vehicle sold
- 17 Paid twice
- 18 Settlement with toll account
- 19 Reason for the complaint
- 20 Amount
- 21 Other reasons
- 22 Comments
- 23 Enclosures
 - 1.
 - 2.
 - 3.
 - 4.
- 24 I hereby confirm that all the information I have provided is accurate and complete.
Toll Collect GmbH will store, process and use your data for complaint-related purposes.
- 25 Place, date
- 26 Signature, company stamp
- 27 Please send the form, with an authorised signature and official company stamp, to: Toll Collect GmbH, Customer Service, Postfach 11 03 29, 10833 Berlin, Germany.
- 29 Fax
(please include country code and area code)
- 99 * Required field

