

**Eisenbahn-Bundesamt (EBA)**

Eingangsstempel EBA\*

Eisenbahn-Bundesamt  
 Fahrgastrechte  
 Heinemannstr. 6  
 53175 Bonn

Geschäftszeichen EBA\* \_\_\_\_\_

VMS-Nummer EBA\* \_\_\_\_\_

\* completed by EBA

**Passenger complaint****Please note:**

**Before submitting a complaint to Eisenbahn-Bundesamt please turn to your carrier first.**

**1. Personal details of the complainant**

Family name:		First	
Address:			
Postal code, town/city, country:			
Telephone:		e-mail:	

**2. Please mark the reason of complaint with a cross:**

<input type="checkbox"/> Contract of carriage, ticket	<input type="checkbox"/> Information
<input type="checkbox"/> Persons with reduced mobility	<input type="checkbox"/> Delays
<input type="checkbox"/> Assistance	<input type="checkbox"/> Cancellations
<input type="checkbox"/> Other	

**3. Did the carrier answer your complaint?**

(Please enclose copies)

 Yes No

4. Please describe the incident, which causes your complaint from your point of view:

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If the space for your data is not sufficient, please use a supplement!

5. Please give us detailed information about your journey  
attach a copy of the ticket (s) and travel documents

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Date/Period of travel	Tour operator/Travel agent
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Ticket price:	
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Kind of ticket:	(Single ticket/Season ticket)
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Scheduled departure time:		Scheduled arrival time:	
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Actual departure time:		Actual arrival time:	
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Place of Departure: (Habor/Terminal/Pier)		Place of Destination: (Habor/Terminal/Pier)	
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6. Assistance: (free)

<input type="checkbox"/> Refreshments <input type="checkbox"/> Meals	<input type="checkbox"/> Alternative route
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<input type="checkbox"/> Alternative transport services	<input type="checkbox"/> Possibility to stay overnight was granted
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Location, Date

\_\_\_\_\_

Signature

Please note: your data is needed for the treatment of your complaint and for this purpose will be collected.