## UnionPay Acquiring Service Merchant Complaint Form

1. Contact Inform	ation		
Contact Name		Date	
Phone Number		Fax Number	
Mailing Address			
Email Address			
Merchant Name			
Merchant ID			
Terminal ID			
Location(s)			
2. Complaint Deta			
Please fill in the details of your complaint			

**Note:**We will acknowledge the receipt of your complaints within 5 business days. Your complaint will be responded to within 20 business days upon receipt by ICBK at the contact information provided in this Merchant Complaint Form. We will inform UnionPay International (UPI) in writing of the aggregate number of any Code-related complaints, the nature of the merchant complaints, and the outcomes on a semi-annual basis.

