

## COMPLAINTS AND INVESTIGATION DIVISION

### COMPLAINTS-ASSISTED FORM

**REMINDERS:** Complaints that are insufficient in form and in substance may cause the **outright dismissal** of your complaint. To avoid that:

1. Always fill out the Complaints-Assisted Form **legibly, completely and accurately**.
2. Do not forget to **attach all your evidence/proof** to support your complaint.
3. Submit **ONE COMPLAINT FORM PER RESPONDENT**.
4. Provide us with a **valid government issued I.D.** List of accepted government issued IDs:
  - Philippine Passport
  - Philippine Driver's License
  - PRC ID
  - Postal ID
  - Voter's ID
  - GSIS Card
  - SSS Card
  - TIN Card
  - Student ID

**PRIVACY NOTICE:** We collect the following personal information from you when you manually or electronically submit to us your complaint/s: *Full Name, Home address (Full Address see CAF Form), E-mail address, Contact number, ID information.*

**USE:** The collected personal information will be utilized solely for documentation and processing of your complaint/s within the NPC and, when appropriate, endorsement to other government agency/ies that has/have jurisdiction over the subject of your complaint.

**PROTECTION MEASURES:** Only authorized NPC personnel has access to this personal information, the exchange of which will be facilitated through email and hard copy. NPC will only retain personal data **as long as necessary** for the fulfillment of the purpose.

COMPLAINANT INFORMATION			
Name:			
Complete Address:		Unit/Room/Floor/Bldg. No.	Building Name/Tower
		Lot/Block/Phase/House No.	Street Name
		Subdivision/Village/Zone, Barangay	
		Town/District	
		Municipality/City	Province
		Zip Code	
E-mail address:			
Contact number:			
	Female		Male

RESPONDENT INFORMATION			
Name:			
Complete Address:		Unit/Room/Floor/Bldg. No.	Building Name/Tower
		Lot/Block/Phase/House No.	Street Name
		Subdivision/Village/Zone, Barangay	
		Town/District	
		Municipality/City	Province
		Zip Code	
E-mail address:			
Contact number:			
	Female		Male

<b>ALLEGATIONS:</b> Personal information that respondent has processed: (List the personal information processed. Examples of personal information: name, age, address, marital status, email address)
1.
2.
3.
4.
5.

EXHAUSTION OF REMEDIES

☐ Contacted respondent, in writing, to allow respondent to act on the complaint

Attach as supporting documents, any and all correspondence with the respondent on the matter complained: (Please list and properly identify all documents attached)

1.
2.
3.
4.
5.

☐ Did not contact respondent. State reason:

VIOLATION SUBJECT OF COMPLAINT (Tick the box/es that may apply)

- ☐

Sec. 25 Unauthorized Processing
- ☐

Sec. 28. Processing for Unauthorized Purposes
- ☐

Sec. 26. Access due to Negligence
- ☐

Sec. 31. Malicious Disclosure
- ☐

Sec. 27. Improper Disposal
- ☐

Sec. 32. Unauthorized Disclosure

Date and Time of the Incident:

Place of Incident:



**RELIEFS PRAYED FOR:** (Tick the box/es)

*What would resolve this complaint for you? Minimum of one item must be selected. You may also opt to select a combination of the items provided. Please explain each item selected.*

☐

Damages

☐

Fine

☐

Others, please describe

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I accomplished and reread the foregoing complaint and hereby attest that all the allegations contained therein are true and correct of my own personal knowledge and based on authentic records.

\_\_\_\_\_  
Complainant  
(Signature over Printed Name)

*Note: If the complainant wishes to apply for a temporary ban on processing of personal data, a separate application should be filed. It must be verified and shows facts entitling the complainant to the relief demanded.*

**SUBSCRIBED AND SWORN** to before me on this day of \_\_\_\_\_, affiant exhibiting to me his/her \_\_\_\_\_ I.D. with No. \_\_\_\_\_ issued on \_\_\_\_\_ at \_\_\_\_\_ bearing his/her photo and signature.

Doc. No. \_\_\_\_;  
Page No. \_\_\_\_;  
Book No. \_\_\_\_;  
Series of \_\_\_\_.

**VERIFICATION AND CERTIFICATION  
OF NON-FORUM SHOPPING**

I, \_\_\_\_\_, Filipino, of legal age, and  
a resident of \_\_\_\_\_ after  
having duly sworn to in accordance with law, do hereby depose and state:

1. The allegations in the complaint are true and correct based on my personal knowledge, or based on authentic documents;
2. The complaint is not filed to harass, cause unnecessary delay, or needlessly increase the cost of litigation;
3. The factual allegations therein have evidentiary support or, if specifically so identified, will likewise have evidentiary support after a reasonable opportunity for discovery;
4. That I further certify that (a) I have not commenced any action or filed any claim involving the same issues in any court, tribunal or quasi-judicial agency and, to the best of my knowledge, no such other action or claim is pending therein; (b) if there is such other pending action or claim, a complete statement of the present status thereof; and (c) if I should thereafter learn that the same or similar action or claim has been filed or is pending, I shall report that fact within five (5) calendar days therefrom to this Honorable Commission .

**IN WITNESS WHEREOF**, I have hereunto affixed my signature this  
\_\_\_\_ day of \_\_\_\_\_ in \_\_\_\_\_.

\_\_\_\_\_  
Affiant  
(Signature over Printed Name)

**SUBSCRIBED AND SWORN** to before me on this day of \_\_\_\_\_,  
affiant exhibiting to me his/her \_\_\_\_\_  
I.D. with No. \_\_\_\_\_ issued on \_\_\_\_\_ at  
\_\_\_\_\_ bearing his/her photo and signature.

Doc. No. \_\_\_\_\_;  
Page No. \_\_\_\_\_;  
Book No. \_\_\_\_\_;  
Series of \_\_\_\_\_.