

AviationADR complaint form

Welcome to the AviationADR complaints form. To proceed with your complaint please follow the 6 steps below and provide all of the information requested.

Please note: this is the complaint form applicable to complaints about airlines only.

To be eligible to make a complaint against an airline, you must have already complained to the airline directly in writing and either received a final written response (sometimes referred to as a 'deadlock letter') or given the airline eight (8) weeks to respond to your dispute. AviationADR can only deal with unresolved complaints.

In order to complete this complaint form you will need the following information to hand:

DECLARATION

You are required to agree to our terms stated on the declaration page.

ELIGIBILITY

This will confirm if your complaint is eligible to be processed at this time by asking you questions and for information about dates of the complaint.

ABOUT YOU

Your full contact information.

AIRLINE DETAILS

Full contact information of the airline including name, phone and email details of the airline contact with whom you have been corresponding about your complaint.

ABOUT YOUR COMPLAINT

- Full details of the purchase or service
- Full details of the complaint
- Accurate dates of any flight times, purchase of goods/services, etc
- Booking number, Flight number, Airline complaint reference number

If your complaint relates to a flight then we will require all information, including connecting flight information, flight numbers etc. You will be asked to state your desired outcome.

EVIDENCE & SUPPORTING FILES

- Images of any receipts
- Any images to support your complaint
- Any email exchanges with the Airline (saved into a MS word document or a text file)
- Scans or images of any physical letters

To proceed with your complaint please follow the steps below and provide all of the information requested.

Your declaration

Please read and sign this declaration:

- I'd like AviationADR to look into my complaint.
- I understand and acknowledge that AviationADR will need to use my personal information (in-cluding sensitive or personal information) and that AviationADR may need to share some or all of this information with the airline with whom I have a complaint.
- I understand and acknowledge that AviationADR may publish the Adjudicator's final decision.
- I agree to provide true, accurate and full information about my complaint.
- If you are a third party representative or acting on behalf of the complainant, you confirm you have the authority to progress the complaint on their behalf and that they authorise you to accept a resolution.

Signature

Date

 / /

Paper based complaints



If you require your complaint to be strictly by a paper method, please tick this box and provide us with your reasons.

Eligibility to use AviationADR ☐

Before proceeding further we need to double check that you are eligible to bring your complaint to AviationADR at this time. If the answer to any of the following questions is no, then we cannot proceed further with your complaint at this time.

Have you complained direct to the Airline in writing/email?

☐ Yes ☐ No

Has the airline responded to you within in 8 weeks

☐ Yes ☐ No

Did the Airline reject your complaint?

☐ Yes ☐ No

Has the Airline provided a final response?

☐ Yes ☐ No

Did you reject their final response?

☐ Yes ☐ No

Your Details

If you are making this complaint as a Lead Passenger on behalf of yourself and any other person(s) named in your booking, we require the details of each additional passenger and a letter of authority to confirm they permit you to deal with all aspects of the complaint on their behalf. This will confirm you are entitled to accept the remedy or award provided, if appropriate. If the additional passenger(s) is under 18 years old, we will not require a letter of authority.

Title:

First name :

Last name :

Address :

Address :

Town/City :

County :

PostCode :

Phone:

Mobile :

Email :

Any additional passengers

If you require more space please use the last blank page of this complaint form.

Title :

First name :

Last name :

Address :

Address :

Town/City :

County :

PostCode :

Phone:

Mobile :

Email :

Title :

First name :

Last name :

Address :

Address :

Town/City :

County :

PostCode :

Phone:

Mobile :

Email :

Title:

First name :

Last name :

Address :

Address :

Town/City :

County :

PostCode :

Phone:

Mobile :

Email :

Third Party Representative



Please tick this box if you are completing this form on behalf of someone else. If so, please fill in our Representative Authority Form and attach it to this complaint form.

Airline details



We now need to know who the Airline is that you are complaining about and details of your complaint.
Please give the contact details of the head office contact to whom your complaint has been officially made.

Airline company name :	<input type="text"/>	Branch name of Airline :	<input type="text"/>
Airline contact name :	<input type="text"/>	Airline contact phone :	<input type="text"/>
Address :	<input type="text"/>	Address :	<input type="text"/>
Town/City :	<input type="text"/>	County :	<input type="text"/>
PostCode :	<input type="text"/>	Email:	<input type="text"/>

Your complaint details

Where was your purchase made :

Airport ☐ Online Shop ☐ website address:

Airline complaint incident or reference number (if provided by the Airline) :

Please select the type of purchase

Product /Service name

Date of purchase : day / month / year

 / /

Time of transaction : hour / min

 /

An exact time of a transaction could speed up the complaint process greatly, please check your receipt.

Date of initial complaint to the Airline : day / month / year

 / /

Method of payment

cash ☐ credit card ☐ debit card ☐ PayPal ☐

other ☐

What is your desired outcome?

Description and history of your claim : please continue on a separate sheet if required.

What is the type of your complaint

Please choose from the categories below and answer any relevant questions within that category

- Baggage
- Flight Delay
- Flight Cancellation
- Denied Boarding
- Discrimination
- Other

Baggage ☒

Describe the baggage issue

If delayed luggage: How long was the delay?

Was it delayed on your outbound or inbound flight?

How did the delay affect you?

Is there any other information that you feel is relevant?

Flight Delay



How long were you delayed?

Reason for delay

Were you offered free food and drinks or accommodation in the case of a long overnight delay?

Have you received any compensation (money / vouchers) already?

Is there any other information that you feel is relevant?

Flight Cancellation



Reason for cancellation

How long before departure were you told of the cancellation?

Were you offered re-routing?

Were you offered free food and drinks or accommodation in the case of a long overnight delay?

Have you received any compensation (money / vouchers) already?

Is there any other information that you feel is relevant?

Flight Reservation ☐

Describe the flight reservation issue

Tell us about your complaint?

Denied Boarding



Describe the denied boarding issue

Why were you denied boarding?

Discrimination



Please give full details of your discrimination complaint

Tell us about your complaint?

Other type of complaint ☐ ☒

Please give a description of any other issues, please use a separate sheet if required.

Your Flight Details ☐ ☒

Scheduled Departure Date:

day / month / year

/

/

Scheduled Departure Time:

hour / mins

Airline:

How many flights did your journey consist of?

Departure airport

Destination airport

Flight number (if known)

Booking reference (if known):

Scheduled arrival time

Actual arrival time

Details of any connecting flights that are relevant to your complaint

Please provide any extra information you would like to include in your complaint here.

Evidence & supporting files ☐

It is important that you provide as much evidence as possible to support your complaint as our recommendations and determinations are based on fact and evidence.

This part of your complaint is very important. We therefore urge you to supply as much evidence as possible.

Please go through each evidence category below and tick the box to confirm that you have enclosed the relevant information.

☐ Receipts ☐ Email ☐ Letters ☐ Pictures

Please note that we will not begin processing your complaint until we are satisfied that we have received all relevant evidence therefore please enclose all the evidence at this stage.

Our contact details

Post: Please post this form and all accompanying evidence to our address:

AviationADR
12 Walker Avenue
Stratford Office Village
Wolverton Mill
Milton Keynes
MK12 5TW

Phone: 020 3540 8063
(please note that we do not accept complaints over the phone)

Email: enquiries@aviationadr.org.uk

Website: www.aviationadr.org.uk

Company information:

AviationADR (a division of Consumer Dispute Resolution Ltd) is approved by the Civil Aviation Authority (the aviation regulator) to operate as an ADR body for aviation consumers. AviationADR is an approved alternative dispute resolution provider pursuant to the Alternative Dispute Resolution service for Consumer Disputes (Competent Authorities and Information) Regulations 2015.

Data Protection Registration reference: ZA093108

LETTER OF AUTHORITY FORM



AviationADR Case ID:

Please complete this form if you ("the Complainant") want to authorise another person to act on your behalf ("the Authorised Person"). For example, this Authorised Person may be a friend, relative or a lead passenger who is booked under the same booking reference.

You can change or cancel this authority at any time by contacting us on 0203 540 8063.

Declaration:

- I authorise the Authorised Person to act on my behalf in relation to my complaint.
- I understand that any information given to the Authorised Person will be deemed to have been given to me.
- I give permission to the Authorised Person to discuss all aspects of my complaint on my behalf.
- This will confirm the Authorised Person is entitled to accept any remedy or award provided, if appropriate.
- I confirm the Authorised Person will receive, if appropriate, the full payment of compensation and they shall then be responsible for distributing the payment accordingly.

About you, the Complainant:

Name:.....	Signature:.....	Date:..... /..... /.....
Name:.....	Signature:.....	Date:..... /..... /.....
Name:.....	Signature:.....	Date:..... /..... /.....
Name:.....	Signature:.....	Date:..... /..... /.....
Name:.....	Signature:.....	Date:..... /..... /.....

* Please use a second Letter of Authority form if required

About the Authorised Person:

Authorised Person's title:

First name:

Last name:

Full postal address:

Email address:

Telephone number:

Alternate telephone number:

Airline name:

Booking reference:

Flight number:

Date of flight: