**Complaint (Request for Inspection) Form**

**To:**

**The Chair, Inspection Panel**

**The World Bank Accountability Mechanism, MSN: MC 10-1007, 1818 H St., NW, Washington, DC 20433, USA. Fax: +1(202)-522-0916. Email:** [**ipanel@worldbank.org**](mailto:ipanel@worldbank.org)

*(Please answer the questions below as best as you can. Once the form is submitted, we will contact you to collect any additional necessary information.)*

**Section 1: Complaint**

1. What harm do you believe the World Bank-financed project caused or is likely to cause to you or your community? Please describe in as much detail as possible.

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2. What is the name of the World Bank project? (If known)

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3. Where is the World Bank project located? (Please include country name)

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4. Do you live in the project area?

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5. Have your concerns previously been reported to the World Bank? If yes, please provide the details about those communications and explain why you are not satisfied with the Bank’s response.

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6. If known, please list the World Bank’s operational policies procedures you believe have not been followed.

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7. Do you expect any form of retaliation or threats for filing this complaint?

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8. In addition to receiving information about the Compliance investigation process, would you also like to receive information about the option of dispute resolution?

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**Section 2: Contact Information**

9. Are you complainants or a representative of complainants\*?

Complainants:  Representing a complainant or community:  Other:  (Please explain)

10. Would you like your name and contact details to be kept confidential? (We will not disclose your identities to anyone without your prior consent.) Yes  No

11. Complainants' or representatives’ names (minimum two names and signatures are required):

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| --- | --- | --- |
|  | **Complainant /Representative 1** | **Complainant /Representative 2** |
| Name |  |  |
| Address |  |  |
| Phone |  |  |
| Email |  |  |

12. By completing and submitting this form, we authorize the Inspection Panel to investigate the issues as described in this form.

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| **Signature 1** | **Signature 2** |
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Signatures (more signatures can be sent as an attachment):

NOTES*:*

* *\*If you are a representative of complainants, we will need a letter from the complainants authorizing you to represent them.*
* *Please attach supporting documents, if available.*
* *If you have any difficulty in completing the form, please contact the World Bank Accountability Mechanism at Email:* [*ipanel@worldbank.org*](mailto:ipanel@worldbank.org) *or by phone: +1-202-458-5200.*