

**Form of inquiry (complaint/notification)**

\_\_\_\_\_  
*(Name, surname of applicant)*

\_\_\_\_\_  
*(Address, telephone number)*

In case of need and aiming to obtain precise information related to the matter, I do not contradict that my identity is revealed during the examination of the case.

\_\_\_\_\_  
*(Signature)*

\_\_\_\_\_  
*(Name, surname of applicant)*

To the State Labour Inspectorate of the Republic of Lithuania  
under the ministry of Social Security and Labour

**INQUIRY (COMPLAINT/NOTIFICATION)**

**REFERRING TO** \_\_\_\_\_

20 year \_\_\_\_\_ day

\_\_\_\_\_  
*(Place of issuance)*

Name of legal entity (institution, enterprise, organization)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Activity

\_\_\_\_\_  
*(Please describe shortly the essence of the inquiry, indicating concrete circumstances, regarding which actions you are applying, indicate concrete questions relevant to the subject of application, also your position, preferences, etc.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mark the relevant X

I will get the answer at SLI division

Please send the answer by post

Please send the answer by e-mail \_\_\_\_\_

\_\_\_\_\_  
*(Signature)*

\_\_\_\_\_  
*(Name, surname of the applicant)*