

INTERNAL REPORT OF VIOLATION OF REGULATIONS IN THE WORKING ENVIRONMENT ACCORDING TO ZZPri

Note: You can also send reports in a different format, but it is intended that you use this form. You can submit the application anonymously or provide your information.

INFORMATION ABOUT THE WHISTLE-BLOWER
Name and surname:
Employee or other connection with the work environment (contract worker, student, former employee, candidate in the employment process, etc.):
Address:
E-mail:
Telephone number:
Any other contact information:

ANONYMOUS REPORT

I submit the report anonymously and I am aware that you will not inform me about further action.

I am submitting the report anonymously, but I still want to be informed about further action. Notify me at: (enter information about e-mail address, address, phone number)

Istrabenz plini d. o. o. Bertoki, Sermin 8A 6000 Koper, Slovenija +386 5 663 46 00 info@istrabenzplini.si www.istrabenzplini.si

ID za DDV: SI89356179 Matična št.: 5419263 Št. reg.: Okrožno sodišče v Kopru/10153000 Osnovni kapital: 10.000.000,00 € NLB: SI56 0294 5025 8284 357



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INFORMATION ABOUT REGULATION VIOLATION

I obtained information about the violation in the work environment. The violation relates to the working environment in Istrabenz plini d.o.o. or to the related work environment (specify in as much detail as possible):

Time of start, duration and end of violation: (the whistle-blower is not entitled to protection if they submitted the report two years or more after the violation ceased)

Information about the violator or violators:

Detailed description of the violation (what, when, who, how, where): (Indicate the violated regulation, any witnesses, documents, e-mails or any other evidence on which your claim is based)

PROTECTION AGAINST RETALIATION

Do you believe there is a risk of retaliation in your case as a result of this report, e.g. retaliation by management, colleagues or a third party?

If so, please indicate what retaliatory measures you consider possible:

Do you feel you need help and protection from retaliation:

- information on legal options,

- assistance in administrative and judicial proceedings due to retaliatory measures by issuing a certificate on the filing of the report and by providing evidence from the reporting process,

- other _____

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INFORMATION ON REPORTING PROCESS

Your report will be processed by a trustee. If necessary, other persons who may be familiar with the content of the report, but not with your identity, will also be included in the process, even when you provide your information in the report.

In accordance with the ZZPri, the trustee will notify you within the prescribed time limits:

- after seven days of receiving the report on whether they will consider it or not,

- after three months on the status of the reporting process,

- at the end of the process on the implemented measures and the outcome of the procedure.

If you believe a criminal offence has been committed, we suggest you report it to the competent authorities.

DECLARATION OF TRUTH

I declare that the information in this report is true and I submit the report in good faith. I am informed that according to Article 28 of the ZZPri, a fine of between 400 and 1,200 EUR is imposed for the offense of an individual who, contrary to the ZZPri, intentionally reports or publicly discloses false information.

Place and date:

Signature:

(omit in case of anonymous report)

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