Complaint Form

Online complaint form capturing the complainant, what went wrong, desired outcome and supporting evidence.

Full name *	
Email address *	
Phone number	
Address	
Reference number (if known)	
Date of incident	_____ / _____ / _____
Complaint relates to *	☐ Service ☐ Staff ☐ Billing ☐ Property ☐ Other
Please describe your complaint *	
What outcome are you looking for?	
Supporting photo / document	*Attach photo or sketch*
Preferred contact method	☐ Email ☐ Phone ☐ Post
I consent to my information being used to investigate this complaint *	☐ Yes ☐ No

* Required