

COMPLAINT FORM - CLIENT



Detail of person making complaint



Allocate report number e.g. All complaint records commence with a C and then the first report of 2014 would be 1/14

Name:.....

Address:.....

.....Postcode:.....

Phone:..... Mobile:.....

Date of incident (if applicable):...../...../..... Time:.....

Nature of Complaint (explanation):.....

.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....

What would you like to see happen?.....

.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....

Signed:..... Date:...../...../.....

- All complaints are treated confidentially and there will be no loss of service because of a complaint being made.
- You have a right to use an advocate of your choice – if you need help in obtaining one, we can refer you to an appropriate advocacy service.
- Complaints are very valuable to the service and assist us in maintaining standards and improving the service.
- Please forward your complaint to The CEO, Easy-Go Connect Inc. Unit F1, Building F, 22 Powers Road, Seven Hills NSW 2147.