



Complaints Form

Name

Telephone Number

Email Address

(Your contact details will remain confidential)

Date and time of incident

Date / /

Time.....

Location or stall Involved

Stall Holder Name

Stall Name

Location other

Description of Complaint

Please describe the issue clearly and include as many relevant details as possible—what happened, who was involved, any steps already taken etc.

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Witnesses

If any witnesses, please provide their name and contact details

Witness 1

Name.....

Telephone number

Email

Witness 2

Name

Telephone number

Email

Do you have any photos or evidence?

☐ Yes ☐ No

If so, please attach files

What resolution are you hoping for?

This image shows a full page of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

Privacy and confidentiality

Your complaint will be handled with care and all personal information will be kept confidential and only used to address the issue.

For Office Use Only

Date Received

Received by

Action taken/notes

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