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## **Customer Complaint Form COMMUNITY**

DCSB 02 Form 1

Customer Information					
Customer Name					
Customer Address					
Phone Number					
Email Address					
Complaint Information					
Type of Complaint	☐ Service	☐ Elected Member	☐ Employee		
Details of Complaint (include date, times and issue)					
Signature					
Customer Signature					
Dato:					

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Office Use Only						
Investigation Details:						
Corrective Actions:						
Followup Required:		□ YES	□ NO			
Customer Advised of Corrective Actions		□ YES	□ NO			
Investigating Officer Name						
Investigating Officer Signature						
Date:						
Final Signoff						
CEO Name:	Damian Carter					
CEO Signature:						
Date:						