**CUSTOMER COMPLAINT FORM**

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| **CUSTOMER INFORMATION** |
| Customer Name:  |
| Contact Number: |
| Customer Address:  |
| Email: |
| **COMPLAINT INFORMATION** |
| Complaint Date:   |
| Complaint Details: |

**Name of person completing this form:**

**Signature:**

*\*The Consumer may refer their complaint onto the Property Ombudsman within 12 months of our final viewpoint.*