

COMPLAINT FORM

If you have a complaint, please fill out this form and lodge it with us as soon as you are able so we can try to resolve the problem as quickly as possible.

YOUR DETAILS

Title (please circle): Mrs Ms Mr

Family Name: Given Names:

Address: Post Code:

Building Name: Lot Number:

Telephone: (Home) _____ (Mobile) _____ (Work) _____ (Fax) _____

Email:

PARTICULARS OF COMPLAINT

Please provide details of your complaint. Include dates, people involved, and attach copies of relevant documents as necessary. If space is insufficient, please attach additional details.

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What would you like us to do to resolve the matter, if possible?

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Your signature _____ Date __/__/__

Please forward this form:

By **email**: sskb@sskb.com.au

By **fax** to The Complaints Officer: (07) 5504 2001

By mail: The Complaints Officer

Stewart Silver King and Burns

PO Box 8319

GCMC QLD 9726

Complaints will be investigated and responded to in accordance with our Complaints Procedure, located on our website – www.sskb.com.au