



BOGNOR REGIS TOWN COUNCIL

COMPLAINT FORM

| | |
|----------------------------|--|
| Date | |
| Name | |
| Address | |
| Postcode | |
| Daytime Contact No. | |
| Evening Contact No. | |

Nature of Complaint – please complete the following: -

| | |
|---|--|
| What Service, Policy, Person or aspect of the Town Council is the complaint about? | |
| When and where the situation took place, including, if possible, details such as time, day, date and location? | |
| The names and, if possible, contact details of any others involved? | |
| In your opinion, what action or decision would resolve the matter? | |

To register a complaint please complete, sign and return this form with any other information you wish to provide to support your complaint to Bognor Regis Town Council.

Please give details of the expectations you held of the Council Services, particularly because of information provided or that Personnel or Councillors may have given.

Signed:_____

Date:_____

The Town Council will treat all complaints with respect and in confidence. Any personal data gathered as part of a formal complaint will be handled in accordance with the Town Council's Data Protection Policy.