



## COMPLAINT FORM

ALL QUESTIONS MUST BE FULLY ANSWERED

### 1. COMPLAINANT DETAILS *(please use capital letters)*

* Name	Surname
Postal Address	
Post Code	ID Card No.
Tel/Mobile No.	Email

*\*If the complainant is a firm, write the name of the firm and leave Surname and ID Card No. fields blank*

### 2. PARTICULARS OF REPRESENTATIVE *(if applicable)*

Name	Surname
Postal Address	
Post Code	ID Card No.
Tel/Mobile No.	Email





**9. APPOINTMENT OF COMPLAINANT'S REPRESENTATIVE AND CONSENT TO ACT ON HIS/HER BEHALF**

I hereby appoint and authorise \_\_\_\_\_  
*(insert name and surname of appointee)*

whose Identity Card number and other particulars are given elsewhere in this form to act as my representative in connection with my complaint in all stages of the investigation.

Signature of complainant	Date
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**10. REPRESENTATIVE'S RELATIONSHIP** *(tick the appropriate box)*

Family Member	<input type="checkbox"/>
Friend	<input type="checkbox"/>
Professional Person	<input type="checkbox"/>

**11. PREFERRED METHOD OF CORRESPONDENCE**

By post	<input type="checkbox"/>
By email	<input type="checkbox"/> Email address: _____