

SERVICE COMPLAINT REPORT

Personal details

Name:	
Residential address:	Postcode:
Postal address:	Postcode:
Telephone:	Mobile:
Email:	Date:

Complaint details

Which department/section did you deal with?

Staff member dealt with so far:

Complaint details:

How would you like to resolve this issue?

Would you like a response? Yes No

Note: If a box is not ticked, the default will be no response required.

How you would like your response? (written, telephone, email etc.)

Enclosure - list of enclosed documents

Signature: _____ Date: _____

Thank you for your time and assistance. Your response will help us to monitor and improve the quality and effectiveness of our services.

When complete, please detach the form and deliver to:

In person:
Administration Building
3 Peel Street, Mandurah
Monday to Friday
8.30am to 4.30pm

In writing:
Chief Executive Officer
City of Mandurah
PO Box 210
Mandurah, WA 6210

Phone: 9550 3777
Fax: 9550 3888
Email: council@mandurah.wa.gov.au
Website: www.mandurah.wa.gov.au