

COMPLAINT FORM

1.1 **Name of Complainant:** _____
Home Address: _____

Telephone No: _____
Email Address: _____
Signature: _____
Date: _____

1.2 **Do you want the Association to deal directly with someone acting on your behalf?** **YES/NO**

If YES, please ask your helper or advisor to fill in the section below:

My relationship to the complainant is:

My address is: _____

Telephone No: _____

Email Address: _____

Signature: _____

Date: _____



2. Please give details of your complaint below (Attach a separate sheet if required). Remember to include dates, times, names and any other relevant information

Supporting Documentation

3. Please list below any supporting documentation which you are including with your complaint

Resolution of Complaint

4. What action would you like the Association to take to help resolve your complaint?

DATA PROTECTION

In order to investigate your complaint and help us deliver efficient services, we need to collect relevant personal details. We comply with the Data Protection Act 1998 when dealing with personal data. This means that your personal data will be processed in accordance with the law. Please note that we may share personal data with other organisations where appropriate.

Please tick the box to confirm that you have read the Data Protection information above and are consenting to NEWINGTON HA Housing Association processing your personal data.

Please return the completed form to:

Chief Executive

Newington HA Housing Association
300 – 302 Limestone Road, Belfast
BT15 3AR