Hadleigh Town Council

The Guildhall,
Market Place,
Hadleigh,
IP7 5DT

Tel: 01473 823884

COMPLAINTS FORM

Name	Contact Phone no.
Postal address	Email address
Are you on the Electoral Register at this address?	Yes/No
If not please state where you are registered.	
State here the subject of your complaint, e.g. the Council's policy, action, etc.	
Provide in this section full details of your complaint. Note: • Be clear and concise in your statement. If you require more space you may continue on another sheet. • If you refer to any documents or files a copy of each must be attached and identified in your text. • If an attachment is lengthy or complex you should highlight the relevant section(s) as appropriate to make clear their context.	
Describe here the action you would like the Council to take to resolve your complaint.	

Are you making this complaint on behalf of yourself? Yes/No

Note that the Council's complaints procedure may be used only by individual residents of Hadleigh, Suffolk.

Declaration:

- I have read and understand Hadleigh Town Council's Complaints Policy and I have provided on this form, and any attachments, full information related to this complaint.
- I understand that any information provided after this form has been submitted will not be considered as part of this complaint unless the information is requested by a Hadleigh Town Council Officer or Member while they investigate my complaint.
- I accept that Hadleigh Town Council may publish details of my complaint and its response on their website and on social media. Information will be anonymised.

Signed _____ Date _____