

Complaints form

Use this form if you need to make a complaint.



About You

Title

First name *

Surname *

e.g. Mr, Mrs, Ms, etc.

Email address *

Address 1

Door number

Building name

Street / Road

Address 2

City / County /Borough

Postcode

Telephone number

What is your preferred method of contact? *

☐

Telephone

☐

Letter

☐

Email

☐

About your complaint

Are you complaining on behalf of yourself or on behalf of an organisation? *

☐

On behalf of myself

☐

On behalf of an organisation

☐

On behalf of someone else

When did the incident occur? *

/

/

What area of activity best describes what the complaint is about? *

Please tell us more about your complaint

Please tell us more about your complaint



Will you be sending us any supporting documentation relevant to your complaint

☐ Yes

If yes;

☐ No

What type of evidence are you sending?

e.g. Photos, Video, Screen shots, Advertisement extract etc..

In order to deal with your complaint properly we may need to pass on your details – including your name and address – to third parties, such as our legal representative or the representative you have complained about.

We will not disclose your identity to the organisation(s) complained about without your consent. If you do not provide us with consent this may affect whether we can deal with your complaint. I consent to ISHEP passing on my details to third parties. *

☐ Yes

☐ No

How can the concerns in your complaint be resolved? *

Signature *

Date *

Submit this form and any supporting evidence by email to complaints@ishep.org.uk

