



Complaint Form

In completing this form, please provide as much information as possible which may aid *Dominion* to handle your complaint appropriately.

Details of complainant

Date of complaint: / / 200_

Trading name:

Contact person:

Address:

Telephone numbers home: work:

fax: mobile: e-mail:

Details of person acting on behalf of complainant (if applicable)

Trading Name:

Contact person:

Address:

Telephone number home: work:

fax: mobile: e-mail:

Preferred contact numbers:

Product/service description

Policy/client ref# (if known):

Description:

Problem encountered

Date of occurrence:

Description:

Remedy requested

Yes No

Description:

Signature

Complainant: Date / /

Enclosure: List of enclosed documents

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