



Mackay Regional Council Complaint Lodgement Form

We want to make it easy for you to complain. Simply fill out this form and send it to Mackay Regional Council, by post to PO Box 41, Mackay Qld 4740, by email to council@mackay.qld.gov.au, or fax to (07) 4944 2400. If you prefer, you can ring our Customer Service Centre on 1300 622 529 or visit our website for advice on how to complain. Our website – www.mackay.qld.gov.au – also has a complaints form, which can be sent to us.

Personal Details

Title: _____ Last Name: _____ First Name/s: _____

Address: _____ P/code: _____

Telephone (home): _____ (work): _____ (mobile): _____

Other ways to contact you (e.g. facsimile, e-mail): _____

Preferred way for us to contact you: _____

Are you the person affected by this complaint? Yes: No: If not please advise relationship to the person affected by the complaint: Parent: Friend: Other (please specify): _____

If you are acting on someone's behalf, please advise his or her details: Title: _____ Last Name: _____

First Name/s: _____ Address: _____

P/code: _____ Telephone (home): _____ (work): _____ (mobile): _____

Does the person affected by the complaint have a disability or other special need? Yes: No:

If yes, please specify: _____

Complaint Details

Have you raised your complaint with us before? Yes: No: If yes, tell us who you spoke to, what you were told and why you are still dissatisfied. Attach any documentation you have from your previous contact. Use a separate sheet if needed.

For NEW complaints, tell us what happened? Who was involved? When and where did it happen? For example, does your complaint involve a decision that impacts on you or the quality of service? Make sure you tell us the specific area where the problem occurred. Attach a separate sheet/s if needed. _____

What would you like to see happen as a result of your complaint? _____

Have you done anything about your complaint already? Perhaps you have sought assistance from your local councillor, solicitor, professional advisor, or an investigation agency? If yes, please advise the details, e.g. the person you spoke to, when and the advice received: _____

What to Expect

We take complaints seriously. We will contact you within three working days of receiving this complaint and advise you what we will do and the expected time frame it will take. Your information will be treated confidentially. We will inform you of progress within 21 working days. We will endeavour to resolve your complaint within 35 working days.

Signature

Date

Office Use Only

Complaint received by:

- Telephone E-mail Fax
 Letter In Person Web Other (specify): _____

Date received: ____/____/____

Staff Member who received the complaint: _____

Position: _____

Summary of advice provided to complainant on initial contact: _____

Office Use Only**Complaint referred to:**

- Program Manager Manager Administration Team Leader Coordinator
 Manager Cust. Service Other (please specify) _____

Date of referral: ____/____/____ File Number: _____

Summary of any further advice provide to complainant: _____

Nature of complaint:

- Customer Service Administrative Action Minor Breach of Code of Conduct
 Policy Procedures Other (specify): _____

Location of problem:

- Corporate Services Community Services CEO and Executives
 Development Services Commercial Services Engineering Services
 Councillors
 Other (specify): _____