

Service Complaint Form

Name:	
Residential address:	
Postal address:	
Postcode:	
Telephone:	Mobile:
Email:	Date:
Staff member dealt with so far:	

Complaint details:

Preferred solution:

When complete, please detach the form and deliver to:

- | | | |
|---|---|--|
| In person:
Administration Building
Civic Boulevard, Rockingham
Monday to Friday
8.30am to 4.30pm | In writing:
Chief Executive Officer
City of Rockingham
PO Box 2142
ROCKINGHAM DC WA 6967 | By fax: 08 9592 1705
By email: customer@rockingham.wa.gov.au
Website: www.rockingham.wa.gov.au |
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Copies of this form can also be downloaded from the website at www.rockingham.wa.gov.au