

## COMPLAINT REGISTRATION FORM

<b>Your Name:</b>		
<b>Postal Address:</b>		
<b>Residential Address:</b>		
<b>Telephone:</b>	<b>(BH):</b>	<b>(AH):</b>
<b>Email:</b>		
<b>Preferred method of contact:</b>	<input type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> Post	
<b>Details of complaint:</b> <i>(Please attach any/all relevant information)</i>		
<b>What would be your preferred outcome?</b>		

Please return the completed form to us via the submit button or In Person or By Mail: Pyrenees Shire Council, 5 Lawrence Street, Beaufort VIC 3373