

# Complaint Form

If you are not completely satisfied with the response you have received from the Council Service you have contacted, please use this form.

**Please use BLACK INK if possible**

<b>1</b>	Your Name (block capitals)	
<b>2</b>	Your Address	
		Post Code
<b>3</b>	Your Telephone Number: At home	At work
<b>4</b>	What do you think the Council did wrong or failed to do?	
	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	
<b>5</b>	What should the Council do now?	
	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	
<b>6</b>	Have you already complained to the Council? If yes:	
	<hr/>	
	When (approx. date)	
	<hr/>	
	To whom (name/service/reference)	
	<hr/>	
	How (by letter/telephone etc.)	
	<hr/>	

When you have filled in the form, send it to:

Complaints,  
Test Valley Borough  
Council,  
Beech Hurst, Weyhill Road,  
Andover, Hants, SP10 3BR

To be signed by the person making the complaint

[www.testvalley.gov.uk](http://www.testvalley.gov.uk)

Signed \_\_\_\_\_ Date \_\_\_\_\_