



metro assist

Complaint / Feedback form

Date: _____

Complainant Details	
Name:	
Street Address:	
Suburb:	Postcode:
Email	Mobile:
Contact (if different from above)	
Name:	
Street Address:	
Suburb:	Postcode:
Email	Mobile:
Relationship to complainant	
How would you like to be contacted regarding this matter? <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Mail	
Would you like to remain anonymous? <input type="checkbox"/> Yes We accept anonymous complaints when there is a valid reason and will conduct a confidential investigation if sufficient information is provided. If a complaint is submitted anonymously without supporting evidence or follow-up details, it will be reviewed for potential business improvements, but no further action will be taken.	
Do you need a translator? <input type="checkbox"/> Yes	

(continue next page)
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Head Office

Level 2, 59-63 Evaline Street
Campsie NSW 2194

t. (02) 9789 3744
f. (02) 9718 0236

Bankstown Office

62 Meredith Street
Bankstown NSW 2200

t. (02) 8709 0200
f. (02) 8709 0299

Condell Park Office

43 Simmat Avenue
Condell Park NSW 2200

t. (02) 9790 1766
f. (02) 9790 2622

Description of Complaint / Feedback:

Preferred Solution:

Office use only

Date received:

Complaint received by:

Staff Member Handling Complaint:

Action taken:

Date complaint closed:

Signature:

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