

COMPLAINT REGISTRATION FORM

Your Name:				
Postal Address:				
Residential Address:				
	()			
Telephone:	(BH):		(AH):	
Email:				
Preferred method of contact:		☐ Email ☐	Phone	□ Post
Details of complaint:				
(Please attach any/all relevant information)				
What would be your preferred outcome?				
triat trouid ac your presented outcome.				

Please return the completed form by using the Submit button above, emailing to pyrenees@pyrenees.vic.gov.au, delivering in person, or by posting to: Pyrenees Shire Council, 5 Lawrence Street, Beaufort VIC 3373