Eastcoast Housing
PO Box 728
Moe 3825
Ph: 0351 277160
Fax: 0351 274114

Email: housing@eha.org.au
www.eha.org.au

OFFICIAL COMPLAINT FORM

This form may also be used to initiate an appeal of a decision

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|-------|------|------|
| COILI | Jia | 1116 |

| Name of Complainant | |
|------------------------------------|--------|
| Address | |
| Telephone Number | Mobile |
| Nature of the Complaint or Appeal: | |
| | |
| | |
| | |
| What is the remedy sought? | |
| | |
| | |
| | |
| | |

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Only complete this section if you choose to use an advocate to act on your behalf:

Who is your advocate?

Name: ______ Phone: ______

Do you agree to information being exchanged between this person and Eastcoast Housing? Yes / No (Please circle)

Complainants Signature: ______ Date: ____/___

Advocate's Signature: ______ Date: ____/____

| In order to take action under the RTA (1997), we need substantiated evidence. |
|---|
| List the evidence you have attached to this form |
| |
| |
| |
| |
| |

Any additions or amendments to this form must be initialed by the receiver and the complainant.

Complainant Declaration

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| Consent Withdrawn Complainant wants the complaint to stop. This does not pre-lodging the complaint at a later date. | event the c | omplair | nant from | | |
|--|-------------|---------|-----------|--|--|
| Complainants Signature: | Date: | / | _/ | | |
| Receivers Signature: | Date: | _/ | _/ | | |
| | | | | | |
| Higher Investigation Request | | | | | |
| In line with the Client Complaints / Grievance / Appeals Policy, I request a higher level of investigation of my complaint/s listed above. | | | | | |
| Complainants Signature: | Date: | / | _/ | | |
| Witnesses Signature: | Date: | / | _/ | | |

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REQUEST FOR EVIDENCE

| Property Address | | |
|--|--|--|
| Please mark the most appropriate definition: | | |
| □ Causing nuisance | | |
| □ Interference with peace | | |
| Damage to common areas | | |
| Damage to premises | | |
| Please supply all evidence you have accumulated to substantiate the involvement of our tenant(s) in these breaches of duty: | | |
| Police reports and records of police attendance | | |
| Photographs (for complaints regarding damage to common areas) | | |
| Affidavit outlining the incident and appropriately notarised or | | |
| Written details of the incident/s | | |
| We would like to assure you that we take all complaints seriously, however, we do require that complaints are substantiated. | | |
| The Name of the Person Making the Complaint | | |
| Date/ | | |

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