

## Complaint Form



Please use this form to make a complaint about an electricity or gas provider. You may wish to complete and sign an Authority to Release Information (Form EO Form 3).

(See the About the Energy Ombudsman Brochure for information on what you can and cannot complain about or go to 'Making a complaint' on our website at [www.ombudsman.wa.gov.au/energy](http://www.ombudsman.wa.gov.au/energy))

COMPLAINANT'S DETAILS			
<b>Title (please circle one)</b>	Mr Mrs Ms Miss Dr Other: .....		
<b>Family name</b>		<b>Given name/s</b>	
<b>Address</b>	Street Address:		
	Suburb:		
	Postcode:		
<b>Telephone number(s)</b>	Home		Work
	Mobile		
<b>Email address</b>			
<b>Date of birth</b>			
<b>Country of birth</b>			
<b>Is the complainant of Aboriginal or Torres Strait Islander origin?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>		
<b>Does the complainant have an ongoing disability?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/> Do you require assistance to access our services? If so, please explain: .....		
REPRESENTATIVE'S DETAILS (if applicable)			
<b>Are you complaining on behalf of somebody?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please give details below AND sign a completed Authority to Act as Representative Form (EO Form 2) also get them to sign a completed Authority to Release Information Form (EO Form 3)		
<b>Title (please circle one)</b>	Mr Mrs Ms Miss Dr Other: .....		
<b>Family name</b>		<b>Given name/s</b>	
<b>Address</b>	Street Address:		
	Suburb:		
	Postcode:		
<b>Telephone number(s)</b>	Home		Work
	Mobile		
<b>Email address</b>			



