Customer request form



I would like to (Select one or more options) Required
make a request
make a complaint
offer a compliment
provide a suggestion
Location (if applicable)
Please provide your comments Required
Attach any supporting documentation
Please attach all files to the end of this form before submitting it.

If you need to send more than three files please email them to coh@hobartcity.com.au and reference the form receipt number which is shown when you submit this form.

Date	Requ	iired					
D	D	Μ	Μ	Y	Y	Y	Y

Personal details

If you require a response your contact details are necessary. Normally you may expect either a written or verbal response within 7 working days however it is not always possible to meet this timeframe. For more information see the <u>Customer Service Charter</u> <u>https://www.hobartcity.com.au/Council/Communications-complaints-and-feedback/Customer-Service-Charter</u>.

First name Required
Last name Required
Email address Required
Telephone number Required
Postal Address Required
Preferred contact method (Select one or more options)
email telephone Australia Post no response necessary

Privacy information For information on how Council manages, handles and protects personal information it collects please refer to the <u>Privacy</u> <u>Statement and Policy https://www.hobartcity.com.au/Council/Legislation-and-by-laws/Privacy-statement</u>.

> End of form Don't forget to attach all files before submitting this form