

Customer request form

I would like to: (Select 1 or more options) Required

- make a request
- make a complaint
- offer a compliment
- provide a suggestion

Location (if applicable)

You can select the location by doing one of the following:

- type the address in the text box below
- use the map to find the location
- click on 'use my current location' if the location relates to where you are at the time of submission (you will need to enable the location on your device)

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 Required

(use the calendar icon on the right to select the date)

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Personal details

If you require a response your contact details are necessary. Normally you may expect either a written or verbal response within 10 working days however it is not always possible to meet this timeframe. For more information see the [Customer Service Charter](#).

First name Required

Last name Required

Email address

Telephone number Required

Postal Address Required

Preferred contact method (Select 1 or more options) Required

- email
- telephone
- Australia Post
- no response necessary

In some instances we may need to pass on your contact details to a third party provider if it is determined that they are responsible.

Please indicate below if you give us permission to pass on your details if needed: (Select 1 option) Required

- I consent to my details being given
- I do not consent to my details being given

For information on how Council manages, handles and protects personal information it collects please refer to the [Privacy Statement and Policy](#).

End of form

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