

Feedback Form

You can use this feedback form to send us your appeal, complaint, compliment, suggestion or report.

Appeal

Compliment

Complaint

Suggestion

Report

Name(s): _____

Address: _____

Phone number: _____ **Email:** _____

Preferred method of contact: **Phone** **Email**

Incident

Have you contacted someone about this before? **Yes** **No**

When? Day _____ Month _____ Year _____

Please tell us the details:



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If you are filing a complaint, please tell us what actions we should take to resolve the issue:

Signature(s): _____ **Date:** _____

Thank you for taking the time to complete this form. Please send it via post or email to:

Foundation Housing Ltd
297 Vincent St
Leederville WA 6007

admin@foundationhousing.org.au

FHL OFFICE USE ONLY

| | | | |
|-------------------|-------|---------------|-------|
| Date received: | _____ | Register No: | _____ |
| Date forwarded: | _____ | Forwarded to: | _____ |
| Response date by: | _____ | | |