YORK CONSORTIUM OF DRAINAGE BOARD

Derwent House, Crockey Hill, YORK YO194SR

Tel: 01904 720785 Fax: 01904 720800 E- Mail: bill.symons@yorkconsort.gov.uk

COMPLAINT FORM

Your Name:

Your Address, including postcode:

Your telephone number:

Your E-Mail address:

What, briefly is the nature of your complaint?

What went wrong? (Please give as much detail as you can)

Signed	Date	

A copy of this form will be logged in a register by the Clerk to the Board who will initially deal with your complaint. We will send you an acknowledgement within two working days, telling you who is dealing with your complaint. Within 15 working days of the date of that acknowledgement that person will send you, in writing, either a full response, or a progress report if more details or investigation is required.

If you are not satisfied with the reply you receive then you should write again to the above address and arrangements will be made for a further review to be carried out at a more senior level in the Board.

FOR OFFICIAL USE ONLY:

What do you think is required to put things right?

Date Received:	Reference Number:	Person Dealing: