



Have you tried to resolve this matter on your own? If yes, provide as much detail as you can
Have you previously contacted any other Dreamtime Housing staff member regarding this issue? If yes, provide as much detail as you can
What outcome are you seeking? What would you like to see as the resolution?

We suggest keeping a copy of this completed form for your records

We will be mindful at all times of privacy and confidentiality issues related to sharing this information, however investigations are limited if we cannot use your name. If you don't wish to have your name used, please indicate above.

By signing below, you are also agreeing that we may need to access and use your personal information as provided in order to investigate the matter raised.

Name (please print):			
Signature		Date	

We will advise you in writing of the outcome of your complaint