

Resident Complaint Form

Resident name: -----

Room number: -----

Telephone number: -----

Email address: -----

Date complaint made: -----

Preferred contact method: -----

Date(s) of incident/issue: -----

Location of issue (if applicable): -----

Details of the complaint

Please provide a summary of the complaint, including what happened, when it happened, who was involved, and how you have been affected.

Action already taken

Please state whether you have already reported this matter to a member of staff and, if so, to whom and on what date.

Outcome requested

Please state what action or outcome you would like Curzon Point Limited to consider.

Evidence attached

Please list any documents, photographs, screenshots, correspondence or other evidence attached to this form.

Signed: -----

Reviewed by: -----

Date: -----

Date: -----