

Complaints form

Your details

Forename(s)
Surname
Position (if relevant)
Business name (if relevant)
Address
Post code
Daytime tel. no.
Email address

Details of your complaint

Complaint summary (please summarise your complaint precisely, including dates and any names of employees spoken to)
Have you already asked someone to resolve your complaint? If so who, and what were you told?
What action would you like us to take?

Please enclose copies of any documentation supporting your complaint (e.g. letters, terms and conditions, etc.)

Signature of complainant

Signature:

Complainant name: Please return this form to the following address:

Alex Hilton-Baird Hilton-Baird Collection Services Ltd Woollen Hall, Castle Way

Southampton, Hampshire SO14 2AW

Date:

An acknowledgement of receipt of your complaint will be sent in due course.

