Complaints register form

Under the Building Act 2004, Clause 216(2)(E)(F)



Version:

Date: January 2020 Code: PS-127

	Juliuary 2020	o Te Tihi o Maru
:	PS-127	0 10 11111 0 111010

COMPLAINANT DETAILS				
Name:				
Address:				
Mailing address:				
Contact details:	Landline number: Email address:	Mobile number:		
THE OWNER (who the complaint is about)				
Name:				
Contact person: (only required if different from the owner)				
Site / location address: (where issue has occurred)				
Legal description:	Lot:	DP:		

DETAILS OF COMPLAINT

Description of complaint: (must be relating to a building or building work as described within this complaints section)

COMPLAINANT TO COPMPLETE Signed: Name:

Date: Email to:

enquiry@timdc.govt.nz