

EXTERNAL COMPLAINT FORM

Complainant Name

Address				
Email				
Tel No.				
Mobile No.				
Describe in detail the na				
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Give the name of the pe	rson you	,		
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WLP Office Address:	
Describe how your complaint has a	
Describe what action can be taken	in order to effectively deal with your complaint:
Any additional comments:	
	ts in relation to projects funded under the Rural are dealt with by a separate appeals process).
Signed by Complainant:	
Dated:	

Please return the signed and date form to Waterford Leader Partnership Ltd, Complaints Officer, John Barry House, Lismore, Co Waterford. (Only forms that are signed, dated and that provide contact details will be acted on)