

**PPT SERVICES
COMPLAINT FORM**

YOUR DETAILS	Name	_____
	Address	_____ _____ _____
	Telephone #	_____

COMPLAINT DETAILS	
Date of activity leading to complaint	_____
Reason for complaint being made	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____
Continue overleaf if necessary	

OFFICE USE ONLY	
Date received	_____
Handled by (name / position)	_____
Date closed off	_____
Written response # / date	_____
Signature	_____

Return form, for attention of the manager to:
PPT Services, Unit 4 Lucknow Rd, Walker Lines Industrial Estate, Bodmin, Cornwall, PL31 1EZ