Please tick the box to indicate who you want to deal with your complaint

☐ Executive Officer

☐ Chairperson, Board of Directors

1. **DETAILS OF COMPLAINT**
(What happened?):

When did it happen?: / /

2. **RESOLUTION REQUIRED**
(What do you want us to do?)

3. **COMPLAINANT DETAILS**

☐ (I want my details to remain confidential)

Name:

Address:

Contact no:

Affordable Community Housing Limited
6/75 Parramatta Road
Silverwater NSW 2128
PH: 02 8760 8500
www.achl.org.au