



**St. Matthew's  
Housing Association Ltd.**  
A Non Profit-making Housing Association

**Complaint Form**

**CONTACT DETAILS**

1. Name of Complainant: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone No: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Do you want the Association to deal directly with someone acting on your behalf? YES/NO

If YES, please ask your helper or advisor to fill in the section below:-

My relationship to the complainant is: \_\_\_\_\_

My address is: \_\_\_\_\_  
\_\_\_\_\_

Telephone No: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **DETAILS OF COMPLAINT**

- 2. Please give details of your complaint below (Attach a separate sheet if required). Remember to include dates, times, names and any other relevant information**

## **SUPPORTING DOCUMENTATION**

- 3. Please list below any supporting documentation which you are including with your complaint**

## RESOLUTION OF COMPLAINT

4. What action would you like the Association to take to help resolve your complaint?

## DATA PROTECTION

In order to investigate your complaint and help us deliver efficient services, we need to collect relevant personal details. We comply with the Data Protection Act 1998 when dealing with personal data. This means that your personal data will be processed in accordance with the law. Please note that we may share personal data with other organisations where appropriate.

Please tick the box to confirm that you have read the Data Protection information above and are consenting to xxxx Housing Association processing your personal data.

Please return the form to:-

**Chief Executive, St Matthews Housing Association Ltd., 58 Harper Street, Belfast BT5 4EN**