



MRS OIL NIGERIA PLC

Complaints Management Lodgement Form

SCHEDULE
MRS OIL NIGERIA PLC - COMPLAINT LODGEMENT FORM

1. Complainants Information

Complainants may be contacted and asked to provide additional information to support their complaint.

2. Personal details

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Other
Surname?				
First name?				
Other names?				

3. Contact details

Current contact/ mailing address?			
Telephone number			
Email address			
Tick preferred contact method:	<input type="checkbox"/> Letter	<input type="checkbox"/> Email	<input type="checkbox"/> Telephone

4. Complaint details

Have you lodged a complaint regarding this issue before?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes, when:	

5. Complaint summary

When did the issue happen?	
Where did the issue happen?	
Party(ies) involved?	

What happened? (kindly give details of your complaint)
How would you like your complaint resolved?
List any documentation you have that supports your complaint (attach copies of the documents to this Form)

6. Acknowledgement by the Complainant

I confirm that the information provided above, is true and correct to the best of my knowledge.

Signature of complainant		Date	
--------------------------	--	------	--

7. Privacy notice

The information in this form would be used solely for the resolution of your complaint; the company would not provide any access to authorised officers.

8. Office use only

Complaints Officer			
Signature		Date	
Complaint lodged	<input type="checkbox"/> Telephone	<input type="checkbox"/> In person	<input type="checkbox"/> In writing
Notes			