



# human settlements

Department:  
Human Settlements  
REPUBLIC OF SOUTH AFRICA



## HUMAN SETTLEMENTS OMBUDSMAN COMPLAINT FORM

**FILL IN DETAILS OR WHERE APPLICABLE, MARK WITH AN X**

<b>COMPLAINANT:</b>		Individual			Company			Group Representative				
<b>1. Details:</b>		Name & Surname:										
Identity Document Nr:												
Race:					Gender:		M	F	Age:			
<b>2. Contact Details:</b>		Telephone:			Email address:							
		Cellphone:										
Postal Address:												
Physical Address:												
<b>3. Complaint Details:</b>		<b>Nature of complaint:</b>										
Services		Procedural			Administration			Other				
Have you exhausted the institutional internal process?									Yes	No		
Has legal proceedings been instituted i.e. Summons Administration, Order herein									Yes	No		
<b>4. Complaint Against:</b>		Owner			Tenant			Other				
		National Department			Provincial			Metro/District/Local Municipality				
<b>5. In resolving the matter who did you communicate with?</b>												
<b>6. In chronological order, please briefly summarise your complaint (please attach supporting documents)</b>												
<b>7. Outcome/ Resolutions desired</b>												
<b>8. Where did you hear about us?</b>												
<b>9. Complainant declaration (Individual)</b>		Date:			Signature:							
<b>10. Representative/Company Declaration</b>		Date:			Signature:							