**ARGYLL AND BUTE COUNCIL**

**Complaints Form**

**Please use block capitals**

**Name:** …………………………………………………………………………………………..

**Address:** …………………………………………………………………………………………

…………………………………………………………….. **Postcode:** …………………………..

**Tel No:** ……………………………………. **Email:** …………………………………………….

**What is your complaint?**

**(Please give as much information as possible)**

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**How would you like us to resolve the matter?**

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**Your Signature:**  …………………………………………. **Date:** ……………………………

**Please return the completed form to: Any Argyll and Bute Council Office or send by email to:** [**complaints@argyll-bute.gov.uk**](mailto:complaints@argyll-bute.gov.uk)