**COMPLAINTS FORM**

**YOUR DETAILS**

|  |
| --- |
| First name  |
| Last name  |
| Address  |
| Email address  |
| Contact number  |

**YOUR COMPLAINT**

**What happened?** **Please tell us the key details about your complaint**

You can use a separate piece of paper, if that makes it easier to write about your complaint, or if you need more space...

**How would you like your complaint to be resolved?**

**Who have you spoken to about your complaint?**

**What was their response and when did you receive it?**

Once complete please submit to : info@parmountinsurance.co.nz