



Mogale City

Local Municipality

Title: Surname:

First names:

Postal Address:

Residential Address Ward

Tel Mobile e-mail

Statement of Complaint
(the matter which you want to bring to the attention of the LM)

What would you like the LM to do?

Have you taken your complaint elsewhere if yes please supply the pertinent documentation related to the complaint?

Signature of complainant _____ Date: _____

Received by _____ Date _____

Process followed: _____

Supporting documentation: _____

Recommendations: _____



Closure: _____

Comments of complainant: _____

Signed: _____

Complaint number: