



Part A: To be completed by the person making the complaint.

Register _____
(for TSRA use)

MAKE A COMPLAINT

I would like to make a complaint about the Torres Strait Regional Authority (TSRA)

What Happened: (Describe what you expected to happen and what actually happened – if you know the reason why your expectation was not met please include this information).

(If you have supporting documents please mail them to info@tsra.gov.au or post copies to the address at the end of this form)

When and where did this happen: (State the date, time and location as best you can recall).

Have you previously raised this complaint with the TSRA ? Yes No

If yes, when and how did you make the complaint

What do you expect the TSRA to do to resolve your complaint:

Your contact details (we will use this information to register and resolve your complaint and to contact you with our response).

Name:	
Address:	
eMail:	
Telephone:	

You can print, sign and post this complaint to Chief Executive Officer, Torres Strait Regional Authority, PO Box 261, Thursday Island, QLD 4875. Fax the signed form to 07 4069 1879. Email the signed form to info@tsra.gov.au or

Submit the form by email by clicking on the [Send to TSRA] button, by doing this you agree that your email is a record of your electronic signature.