Complaints register form

Under the Building Act 2004, Clause 216(2)(E)(F)



Version: 8
Date: July 2024
Code: PS-127

DETAILS OF COMPLAINT

COMPLAINANT DETAILS		
Name:		
Address:		
Mailing address:		
Contact details:	Landline number: Email address:	Mobile number:
THE OWNER (who the complaint is about)		
Name:		
Contact person: (only required if different from the owner)		
Site / location address: (where issue has occurred)		
Legal description:	Lot:	DP:

Description of complaint: (must be relating to a building or building work as described within this complaints section)

COMPLAINANT TO COMPLETE Signed: Name:

Date:

Email to: buildingcompliance@timdc.govt.nz