

Completing this form

- Use BLACK pen only
- Print clearly in BLOCK LETTERS
- DO NOT use correction fluid — any amendments should be crossed out and initialled
- Fields with a * are mandatory- action will not be taken without this information

PLEASE NOTE: While all complaints are carefully considered by the QBCC, we cannot pursue them all. To make the best use of our resources and increase benefits to the public, we target areas where there is evidence or where there may be potential loss to consumers. Please refer to the [Compliance and Enforcement Policy](#)

Return your fully-completed form and ALL required documents by:

Post: GPO Box 5099 Brisbane QLD 4001 **email:** qbcc.complaints@qbcc.qld.gov.au (all required documents must be scanned and attached) **in person:** QBCC Queensland service centres are listed on our website.

1. NATURE OF THE COMPLAINT (see note 1 for assistance with this question)

* Please tick the appropriate box (you may tick more than one box)

Unlawful building work	<input type="checkbox"/>	Domestic Building Contract offences	<input type="checkbox"/>	No or non-compliant contract (subcontractors or commercial work only)	<input type="checkbox"/>
Improper use of a licence	<input type="checkbox"/>	Non-payment of Qld Home Warranty Scheme insurance	<input type="checkbox"/>	Advertising offences	<input type="checkbox"/>
Fit and proper concerns	<input type="checkbox"/>	Other (please specify)	<input type="checkbox"/>		

IMPORTANT: Please refer to Section 6 for the evidence the QBCC requires before being able to investigate your complaint.

2. YOUR DETAILS

Please select title		Mr	<input type="checkbox"/>	Mrs	<input type="checkbox"/>	Miss	<input type="checkbox"/>	Ms	<input type="checkbox"/>	Other	<input type="text"/>	
Surname	<input type="text"/>											
First names	<input type="text"/>											
Address	<input type="text"/>											
	<input type="text"/>										Postcode	<input type="text"/>
Home ph	<input type="text"/>					Alt. ph	<input type="text"/>					
Mobile	<input type="text"/>					Fax	<input type="text"/>					
Email	<input type="text"/>											
	<input type="text"/>											
Contact person	<input type="text"/>											

PRIVACY NOTICE: The QBCC is collecting the information on this form to assist in the investigation of your complaint, on a confidential basis and in furtherance of an investigation or possible contravention of the law. The information will only be used to investigate your complaint or for surveying purposes to assist the QBCC to improve its services. Please note, however, that:

- some information used in taking disciplinary action against an offender may indicate the origin of the complaint
- supporting evidence provided by you, including documents such as quotations, contracts, invoices etc may be provided to the alleged offender
- in relation to complaints about fitness to hold a licence, details of all allegations must be provided to the alleged offender
- you may be required to give evidence in court
- the information collected may be requested by other government agencies which have certain powers to request this information or disclosed by order of a court or tribunal of competent jurisdiction
- all information held by the QBCC may be subject to application for access under the *Right to Information Act 2009* (the Act). Information may be released in accordance with the Act and QBCC's Right to Information policy.

OFFICE ONLY	CRN:	<input type="text"/>	Licence No:	<input type="text"/>
	Receipt Amount	\$ <input type="text"/>	Receipt No:	<input type="text"/>

