CommsADR complaint form

Welcome to our CommsADR complaints form. To proceed with your complaint please follow the 6 steps below and provide all of the information requested.

To be eligible to make a complaint against a company, you must have already complained to the company directly in writing and either received a final written response (sometimes referred to as a 'deadlock letter') or given the company eight (8) weeks to respond to your dispute. CommsADR can only deal with unresolved complaints.

In order to complete this complaint form you will need the following information to hand:

DECLARATION
You are required to agree to our terms stated on the declaration page.

ELIGIBILITY
This will confirm if your complaint is eligible to be processed at this time by asking you questions and for information about dates of the complaint.

ABOUT COMPLAINANT
Your full contact information.

COMPANY DETAILS
Full contact information of the company including name, phone and email details of the company contact with whom you have been corresponding about your complaint.

ABOUT YOUR COMPLAINT
- Full details of the purchase or service
- Full details of the complaint
- Accurate dates of any purchase of goods/services etc

You will be asked to state your desired outcome.

EVIDENCE & SUPPORTING FILES

- Images of any receipts
- Any images to support your complaint
- Any email exchanges with the company(saved into a MS word document or a text file)
- Scans or images of any physical letters

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To proceed with your complaint please follow the steps below and provide all of the information requested.

Your declaration

Please read and sign this declaration:

- I'd like CommsADR to look into my complaint.
- I understand and acknowledge that CommsADR will need to use personal details about me (including sensitive or personal information) and that CommsADR may need to share some of this with the company that my complaint is about.
- I understand and acknowledge that CommsADR publishes the Adjudicator's final decisions, although most complaints are resolved by CommsADR caseworker before they reach the Adjudicator.
- I agree to provide true, accurate and full information about my complaint.
- If you are a third party representative or acting on behalf of the complainant, you confirm you have the authority to progress the complaint on their behalf and that they authorise you to accept a resolution.

Signature

Date

/ /

Eligibility to use CommsADR

Before proceeding further we need to double check that you are eligible to bring your complaint to CommsADR at this time.
If the answer to any of the following questions is no, then we can not proceed further with your complaint at this time.

Have you complained direct to the company in writing/email?
❑ Yes ❑ No

Has the company responded to you within in 8 weeks ❑ Yes ❑ No

Did the company reject your complaint. ❑ Yes ❑ No

Has the company provided a final response?
❑ Yes ❑ No

Did you reject their final response?
❑ Yes ❑ No

Company's final response

Please add the final response that you received from the company here, it is imperative that you use the exact wording that the company has provided to you, if you have an official letter, please attach a copy.

Your Details

Title:

First name :

Last name :

Address :

Address :

Town/City :

County :

PostCode :

Phone:

Mobile :

Email :

Paper based complaints

If you require your complaint to be stricly by a paper method, please tick this box and provide us with your reasons.

Third Party Representative ☐

Please tick this box if you are completing this form on behalf of someone else and can confirm that you have their authority to do so. If so, **we require a signed letter of authority** to confirm they permit you to deal with all aspects of the complaint on their behalf. This will confirm you are entitled to accept the remedy or award provided, if appropriate. Please attach the letter of authority when submitting the complaint form.

Third Party Details ☐

Title:

First name :

Last name :

Address :

Address :

Town/City :

County :

PostCode :

Phone:

Mobile :

Email :

Company details ☐

We now need to know who the company is that you are complaining about and details of your complaint.

Please give the contact details of the head office or shop contact to whom your complaint has been officially made.

company name :

Branch name of company :

company contact name :

company contact phone :

Address :

Address :

Town/City :

County :

PostCode :

Email:

Your complaint details

Where was your purchase made :

High Street ❑ Online Shop ❑ Website address:

company complaint incident or reference number (if provided by the company) :

Please select the type of purchase

Goods ❑ Services ❑ Product /Service name

Time of transaction : hour / min

Date of purchase : day / month / year
/ /
:

Date of initial complaint to the company : day / month / year
/ /

Method of payment
cash ❑ credit card ❑ debit card ❑
other ❑

What are you complaining about

Please choose from the categories below

- ❑ Mobile Handsets
- ❑ Rollover Contracts
- ❑ Contract Disputes
- ❑ Service Faults
- ❑ Phone Socket
- ❑ Faulty Services
- ❑ Incorrect Charges
- ❑ Non-micro Business Telephone Bills
- ❑ Non-micro Business Broadband Bills
- ❑ Telephone or Broadband Package Disputes
- ❑ Premium Rate Services
- ❑ Location of Telephone Masts
- ❑ Other (please specify below)

Other type of complaint

Please give a description of any other issues, please use a seperate sheet if required.

What is your desired outcome?

Description and history of your complaint : please continue on a seperate sheet if required.

Evidence & supporting files

It is important that you provide as much evidence as possible to support your complaint as our recommendations and determinations are based on fact and evidence. We therefore urge you to supply as much evidence as possible.

Please go through each evidence category below and tick the box to con irm that you have enclosed the relevant information.

❑ Receips ❑ Email ❑ Letters ❑ Pictures

Please note that we will not begin processing your complaint until we are satisfied that we have received all relevant evidence therefore please enclose all the evidence at this stage.

PLEASE DO NOT PROVIDE ANY ORIGINAL DOCUMENTS IF YOU WISH TO USE THEM IN THE FUTURE.
Please only send us copies, as we cannot send documents back to you.

Our contact details

Please post this form and all accompanying evidence to our address:

Unit 5, Homelands, Higher Union Road, Kingsbridge, TQ7 1EQ

Phone: 0203 598 7390

Contact Centre: www.cdrl.org.uk/contact

Website: www.commsadr.co.uk

Company information:

Consumer Dispute Resolution is authorised by the Secretary of State and is an approved alternative dispute resolution provider pursuant to the Alternative Dispute Resolution service for Consumer Disputes (Competent Authorities and Information) Regulations 2015.

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