

# Complaint Form

We take client feedback very seriously.  
If you have been unable to resolve matters with our office,  
please fill in our complaints form so we can attend to  
matters as our highest priority.

**Phone:** 02 9371 9090

**Email:** [complaints@kooperlevicom.au](mailto:complaints@kooperlevicom.au)

## 1. Client details

Title      Given name(s)

Family/Surname

Unit/Lot Number:

Property address

Suburb

Postcode

Daytime telephone number

Mobile Number

Preferred phone contact time

8:30am - 10:30am     10:30am - 12:30pm     12.30pm - 3.30pm     3.30pm - 5.00pm     Anytime

Email address

## 2. Description of issue / complaint

Please provide a description of your complaint

Date issue arose

Date concern communicated with Strata Manager

Details of who, from our team, you raised the issue with

Upload Image:

## 3. Desired outcome

What outcome are you seeking?

If applicable, please provide feedback as to how we can improve to avoid the issue recurring.

I declare that the information supplied by me is to the best of my knowledge, true and correct. I acknowledge that the recipient of my complaint will:

- Use information provided to investigate, resolve or otherwise deal with the complaint; and
  - To their best endeavours, respond to my complaint in a manner that;
- i) Is sincere and seeks to finalise issues as best as possible for all parties  
ii) Prioritise its obligations pursuant to the agency agreement held with client

Signature of complainant

Date signed (DD/MM/YYYY)

This form is designed to be completed in Adobe Reader. A cross appearing in the digital signature field above may indicate a compatibility issue. If a cross appears please sign here:



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