File No.:		
Pate:	Person receiving the complaint:	
Basic information concerning the compla First and last name:	ainant: Company/institution:	
Category (contractor/supplier/local	Address and phone number/e-mail	
community):	address:	
Preferred method of contact (by phone,	by post, by e-mail)	

PART II Complaint description		
Please describe the subject matter of the co	omplaint:	
Preferred method of communication (in writing – by letter/e-mail; orally – in person/by phone):		
Date of lodging the complaint:	Date of acknowledgment of receipt of the complaint:	
Signatures:		
Date and the complainant's signature:	Date and signature of the person receiving the complaint:	

PART III Decision/closure of the complaint Steps taken to resolve the complaint and outcome of dispute resolution:		
Department:	Manner of communication for providing a	
	response:	

Dispute closure date:	
Signatures:	
Date and the complainant's signature:	Date and signature of the representative of the RES Office/Stakeholder Management Team: