

**EARBY & SALTERFORTH INTERNAL DRAINAGE BOARD**

**53 Millholme Rise, Emsay, Skipton, North Yorkshire BD23 6NU**

**Tel:** 01756 794247 **E- Mail:** walltown@btconnect.com

**COMPLAINT FORM**

Your Name:

Your Address, including postcode:

Your telephone number:

Your E-Mail address:

What, briefly is the nature of your complaint?

What went wrong? (Please give as much detail as you can)

*(continue on separate sheet if necessary)*

What do you think is required to put things right?

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**Signed**

**Date**

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A copy of this form will be logged in a register by the Clerk to the Board, who will initially deal with your complaint. We will send you an acknowledgement within two working days, telling you who is dealing with your complaint. Within 15 working days of the date of that acknowledgement that person will send you, in writing, either a full response, or a progress report if more details or investigation is required.

If you are not satisfied with the reply you receive then you should write again to the above address and arrangements will be made for a further review to be carried out at a more senior level in the Board.

**FOR OFFICIAL USE ONLY:**

**Date Received:**

**Reference Number:**

**Person  
Dealing:**

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