



SARCEE MEADOWS HOUSING CO-OPERATIVE LTD.

CONFIDENTIAL

MEMBER COMPLAINT FORM

Date: _____

Complaint Against: Unit # _____

Name: _____

Phone: _____

Complaint concerns [excluding pets and parking]: _____

Brief description of event[s] [when, where, specific problem]: Use the back of this form, if more room is required. _____

Is this your first written complaint regarding this matter? Yes _____ No _____

If NO when was your previous complaint? _____

What was the result? _____

I understand that this matter will be handled by the *grievance and resolution committee* and that my identity will remain confidential.

Signature of complainant

Unit # _____

Phone: _____