

PO Box 3547 Port Vila Vanuatu Tel: +678 27621



## For TRR use only

Complaint number:	
Type of Complaint (eg. Internet rates, network coverage etc):	
Date received	
Date completed	

## TRR CUSTOMER COMPLAINT FORM

## Complete this form and send to TRR only after you have failed to receive satisfaction from your service provider

Family Name of complainant:	
Forenames:	
Address of Complainant:	
Fixed Number:	
Mobile Number:	
Email address:	
Service Provider's Name against which the complaint is being made:	
Nature /Facts of the Complaint:	
Dates of corresponding with Licensee (Attach copies of correspondence. If billing dispute attach copies of bills):	
Signed:	Date: