

# HIGHVELD HORSE CARE UNIT COMPLAINT FORM

**\*CONFIDENTIALITY**

Please note that under no circumstances will your details be given out to anyone without your express permission – we may need to contact you for further information, directions, or to give you an update on the situation.

Name of Complainant:

Contact Details: Tel: (w)                      (cell)                      (e mail)

**COMPLAINT:**

What is the problem?

How many animals are involved?

How long has the situation been like this?

Do you know the owners details?

How urgent would you rate the situation 1-10?

Where is the complaint?

Please give directions:

If the situation is serious and results in legal action, would you be prepared to give a witness statement?

Are you aware of any other witnesses?