

Help using this PDF form

To access and fill in this form you'll need to save it first and then open it from within Adobe Acrobat Reader - it might not work properly if you open it directly from a web link or other PDF readers, for example *Preview* on a Mac or *Foxit* on a PC. You can download **Adobe Reader** free of charge from the Adobe website. Please follow these steps:

- save the attached form (in your 'documents' folder, for example)
- [download Adobe Reader](https://get.adobe.com/uk/reader/) for free from <https://get.adobe.com/uk/reader/> or your App Store
- open Adobe Reader and then use that to select the saved form

If you are unable to use the form due to issues with the computer or mobile device that you are using, a printed version can be requested from any court or tribunal – you can find contact details at <https://courtribunalfinder.service.gov.uk/search/>

If you are living with a disability

HMCTS has a public sector duty and legal obligation under the Equality Act 2010 to provide reasonable adjustments for people living with disabilities to give them equal access to our services and information.

If you require a form in an alternative format (including a larger font size, paper or Braille) please contact your local court or tribunal.

You can find details at <https://courtribunalfinder.service.gov.uk/search/>

This will ensure that your request is noted and any subsequent documents in your case can also be supplied in this format.

Complaint

- HM Courts & Tribunals Service **cannot consider complaints about** a decision a judge or magistrate has made, or the conduct of a judge or magistrate.
- For more information on our complaints process, and how to make a judicial complaint, see leaflet EX343 available from hmctsformfinder.justice.gov.uk
- Please use black ink as the form may be copied. Please return the completed form to the office where the problem occurred. This will help us to sort things out quickly for you.

For official use

Date received

Reference number

Please give the name and address of the venue you are making your complaint about.

About you

Name

Address

Daytime telephone number

Email (if any)

Your case

Case/claim number (if you have one)

Names of parties in the case

v

Your complaint

Please:

- explain clearly what your complaint is about;
- include any facts and events relating to it;
- say why you think a mistake has been made; and
- what loss if any, you have incurred as a result

Please continue on a separate sheet if necessary.

Your signature

Date

Do you have any suggestions to improve the service you have received?