# Complaint form

Have you sought mediation with the Practice Manager prior to completing this form?

YES: Please provide outcome and attach to this form:

NO: Please do so before lodging this complaint form.

## Complainant details:

Name:

Address:

Telephone:

Email Address:

## Details of the animal:

Type of Animal:

Name:

Breed:

Colour:

Sex:

## Details of the veterinarian:

Name of Clinic:

Name of Veterinarian:

Date the incident occurred:

### PLEASE NOTE:

The Veterinary Board does not have the jurisdiction to handle disputes directly relating to **monetary issues**. If your complaint relates to a veterinarian’s fees, you can direct your enquiries to Northern Territory Consumer Affairs: Telephone: 1800 19319.

1. **PLEASE ATTACH A DETAILED REPORT OUTLINING YOUR COMPLAINT**
2. **Please complete the following sections,** which are important in assisting the Board to clearly understand your main concerns and to ensure that all issues are addressed.

**If there is insufficient space, please attach a separate sheet:**

|  |
| --- |
| Specific issues you wish to be addressed: |

|  |
| --- |
| What you hope to achieve from this investigation: |

|  |
| --- |
| Have you lodged a complaint or taken any action in relation to this issue through any other agency?**YES / NO**If YES please provide details below |

|  |
| --- |
| Declaration(Unattested Declaration pursuant to Section 21 of the Oaths, Affidavits and Declarations Act)I,  (Name in Full)Of   (Address)**do solemnly and sincerely declare that:**1. the details provided in this complaint are true and accurate to the best of my knowledge and belief;
2. I make this solemn declaration by virtue of the *Northern Territory Oaths Affidavits and Declarations Act 2010;*
3. I understand that it is an offence to make a declaration that is false in any material particular;
4. I understand that my correspondence detailing the complaint will be sent to the veterinarian concerned for comment; and
5. I give permission for the release of the clinical records to the Veterinary Board.

Declared at the day of 20 **Signature of person making declaration:** **NOTE: This declaration may be witnessed by any person who is at least 18 (eighteen) years of age.****NOTE: This written statutory declaration must comply with Part 4 of the Oaths Affidavits and Declarations Act.****NOTE: Making a declaration knowing it is false in a material particular is an offence for which you may be fined or imprisoned.**  |