



Independent
Case Examiner

Complaint form

If you have any queries about filling in this form or need it in a different format or language, please contact us:
telephone 0845 606 0777
Typetalk Text Direct 18002 0151 801 8800, or
email ice@dwp.gsi.gov.uk

PO Box 155
Chester
CH99 9SA
www.ind-case-exam.org.uk

Please complete this form in **BLOCK CAPITALS** and remember to sign the form at the end.

1 Which Agency or Business are you complaining about?

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The Independent Case Examiner can only look at complaints after they have been through the full formal complaints procedure of the Agency or Business concerned. It is important that you do this before bringing your complaint to us as this gives the Agency or Business a chance to respond and try to put things right. The Agency or Business' final response to your complaint will signpost you to this office if you remain dissatisfied.

Please do not send your complaint to us until you have completed the Agency or Business's formal complaint procedure.

If you would like advice about complaining to the Agency or Business, please call us on 0845 606 0777.

2 Have you completed the complaints procedure of the Agency or Business?

NO Your complaint should be submitted to the Agency or Business concerned. We cannot accept your complaint until you have completed the formal complaints procedure and have received a final response signposting you to this office.

NOT SURE Please contact us on 0845 606 0777 to discuss your complaint.

YES If available, please enclose copies of your complaint to the Agency or Business and its full response to you.

3 Has the matter you are complaining about been considered in Court or do you plan to raise the matter in Court?

YES Unfortunately, it is unlikely that we will be able to look into your complaint. To discuss further please contact us on 0845 606 0777.

NO Please continue completing this form.

4 Details of person whose case it is

Name:

Address:

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Post code:

Telephone no(s) we can contact you on:

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Email:

Your National Insurance Number:

If your complaint is about the Child Support Agency please also provide your reference number:

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If you want someone to complain on your behalf, please complete **section 5**.

If not go to **section 6**.

5 Details of person acting on your behalf

ONLY complete this section if you want someone to act on your behalf.

Name:

Address:

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Post code:

Telephone no(s) we can contact you on:

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Email:

What is your relationship to this person?

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Please read and complete the consent form on the back page and ensure that it is signed.

6 What are you complaining about?

Please describe what has gone wrong and if appropriate provide specific dates (continue on a separate sheet if necessary).

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7 What has been the consequence to you?

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8 What would you like to happen?

Please tell us what would help to put things right (continue on a separate sheet if necessary).

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Signed: **Date:**



Complaining on someone else's behalf - obtaining consent

We know that not everyone is comfortable or confident about making a complaint. Some people prefer to have someone else do it for them. We are quite happy to take complaints made by a representative.

Complainant representative consent

Please fill in this section if you want someone else to make a complaint to the Independent Case Examiner for you.

From: Complainant's details

Your full name:

Your address:

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Post code:

I authorise (name of your representative):

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Their address:

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Post code:

To make a complaint on my behalf to the Independent Case Examiner's Office about (name of Agency or Business):

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I understand that this may result in the Independent Case Examiner disclosing to my representative personal information relating to myself and the complaint I am making.

Signed: **Date:**
(Complainant's signature)