

COMPLAINT FORM

First name	Title	
Last name		
Email address		
Postal address		
Daytime phone	Mobile	
f yes, please tell us who you are making Complainant's name:	g the complaint for, and why, plus pr	ovide the authorization
Complainant's name: Complainant's postal address:		
Reason why you are complaining on I	hehalf of someone else:	
reason why you are complaining on i	belial of someone else.	
What is your interest in this transaction	?	
What is your interest in this transaction	?	
What is your interest in this transaction	?	
What is your interest in this transaction	?	
What is your interest in this transaction	?	
	?	

Please provide details of your complaint, including dates, to enable the committee to get a better understanding of what happened and when. You may use a separate sheet if necessary. Please attach copies of any important documents that might help explain and support your complaint.
ATTEMPTS TO RESOLVE THE COMPLAINT Have you discussed this complaint and attempted to resolve the complaint with the conveyancer? (Conveyancers are required to have procedures in place for handling client complaints). Please try resolving the issue through these procedures first.
Yes No
If yes, what was the outcome? (Please attach copies of any relevant correspondence)
COMPLAINTS ABOUT COSTS (Please complete this section if your complaint is about your Conveyancer's charges) A complaint about costs will usually be considered if it related to a fee that is more than \$2000 plus GST and if it is less than two years since you received the bill.
Did you have a written agreement signed by your Conveyancer and given to you?
Yes No
If yes, please provide a copy of the agreement. Please also provide a copy of the bill(s) of costs and explain why you are complaining about them.

YOUR COMPLAINT

Has the bill been paid?	Yes	No	
If yes, has it been paid	In full	In part	
If paid in part, give deta	ils of payment		
Have the court proceed	lings been issuec	d against you for the payment of the bill? Yes	No
If yes, at what stage are			
WHAT DO YOU WAN	T TO ACHIEVE	BY MAKING THIS COMPLAINT?	
DECLARATION I declare that the inform	ation I have sub	mitted with this complaint, is true and correct.	
Signed:		Date:	

The personal information you provide through the complaints process will be used for the purposes of dealing with your complaint, and will be received by the New Zealand Society of Conveyancer's Complaints Service and the Society's Standards Committee and disclosed only as provided for in the Lawyers and Conveyancers Act 2006 and regulations or otherwise as required or permitted by law. The provision of this information is voluntary but if you do not provide the information, we may not be able to process your complaint. For more information about how information is handled through the complaints process and the NZSoC's privacy and copyright policies refer to www.nzsconveyancing.co.nz

AUTHORISATION

Person on whose behalf the complaint is made:		
I hereby authorizein this matter.		to represent me
Sianed:	Date:	

If you are making this complaint on behalf of someone else, then that person must give permission for you to do

SEND YOUR COMPLAINT TO:

New Zealand Society of Conveyancers Complaints Services 40 Donnington Place Bethlehem Tauranga 3110

Please ensure that all relevant information has been submitted.