



Comhairle Contae Chill Dara

Kildare County Council

Customer Services Complaints Form – Formal Complaint

Name: _____

Address: _____

Phone No: _____

Email: _____

Date: _____

Are you submitting this complaint on behalf of someone else? (Yes/No)

If yes: Please complete the following details for the person you are making the complaint on behalf of. The response to the complaint will be sent directly to the person.

Name: _____

Address: _____

Phone No: _____

Email: _____

Please specify the Kildare County Council service which is the focus of your complaint.
