

STAKEHOLDER COMPLAINT FORM

Please fill in this form and return it to info@eirgrid.com

Trease in it this form and retain it to introducing its con-
Name:
Address:
Phone number:
Email:
Please describe your complaint.
Please give details to help us resolve it:
What happened?
Which organisation, or person, was involved?
Where/when did it happen?
Who did it happen to?
What is the result of the problem?
Signature
Date: