

ABN 6010 3855 713

FEEDBACK FORM

About this form

You must use this form to provide written feedback to the Norfolk Island Regional Council in regards to the services that it provides.

How to complete this form

Ensure that all fields have been filled out correctly in BLOCK LETTERS.

Please note that fields on this form marked with an * are mandatory and must be completed before submitting this form.

Once completed you may submit this form by mail or in person. Please see Lodgement Details for further information.

If there is insufficient space to provide details on this form, please attach a separate sheet(s).

Privacy

Your personal information will be collected, stored, used and treated in compliance with the *Privacy Act 1988 (Cth)* and the Australian Privacy Principles (APP) in force from time to time. Where they are not inconsistent with the above Commonwealth laws, Section 739 of the *Local Government Act 1993 (NSW)(NI)* (protection of privacy) as well as the NSW Model Privacy Management Plan for Local Government and the Privacy Code of Practice for Local Government (NSW) may also be or become applicable to our management and use of your personal information.

YOUR DETAILS					
Title *	Given Name / s *		Family Name *		
Physical Address *	:				
Postal address *					
Home Number *	Mob	ile Number	Busine	ess Number	
Email Address *					

Select the department/(s) or services within Council that you wish to provide feedback on: $*$					
🖵 Airport	Buildings and Grounds	Building Inspectors			
Courts and Tribunals	Customer Care	Economic Development			
Electricity	Emergency Management	Finance			
Fire Services	Governance	Health and Water			
Heritage and Research	Human Resources				
🖵 Library	Lighterage and Ports	🗖 Liquor Bond			
Museums	Planning & Development	🗖 Radio			
Registry	Roads and Open Spaces	Rock Purchase			
Telecom	Visitors Inform. Centre	Waste and Environment			
Waste ManagementCentre	Other, please specify:				

Write your feedback below, if there is not enough space please attach additional pages*				
Signature		Date:		

LODGEMENT DETAILS							
You can lodge this feedback form with Council by:							
Mail:	Norfolk Island Re PO Box 95 NORFOLK ISLAN	-	In Po	erson:	Customer Care Team 9 New Cascade Road NORFOLK ISLAND		
Email:	customercare@nirc.gov.nf						
OFFICIAL USE ONLY							
Receiving O	fficer	Date Received		Action	n Taken		