

## Compliments and Complaints Form

**Please note this complaint should relate directly to the LGPS or Pension Services. For any other complaint please contact your employer.**

Your views are very important to us and we will treat anything you see with the utmost privacy and confidentiality.

### Your Details (Person Completing this form)

<b>Title</b>	
<b>Name</b>	
<b>National Insurance Number</b>	

### Address

<b>Property Name/Number</b>	
<b>Street Name</b>	
<b>Town/City</b>	
<b>County</b>	
<b>Postcode</b>	

### Please fill in your preferred method of contact

<b>Telephone (Day)</b>	
<b>Telephone (Evening)</b>	
<b>Email</b>	
<b>Letter</b>	

**Are you making the comment on the behalf of somebody else?**

Yes

No

If yes, could you provide the person's name and National Insurance Number?

<b>Name</b>	
<b>National Insurance Number</b>	

**Have you already brought this comment to attention before?**

Yes  No

**Please use the space below to provide details of your comment**

**What action, if any, would you like Pension Services to take?**

**Thank you for taking the time to comment on the service provided by Pension Service.**