



# Home Building Complaint Form

ABN 81 913 830 179

Please contact the Builder / Tradesperson about your complaint before you complete this form

Your Details			
Name:			
Address:			
Postcode:			
Phone - Daytime:		Mobile:	
Preferred Phone Contact Time:	<input type="checkbox"/> 8:30am – 10:30am <input type="checkbox"/> 10:30am – 12:30pm <input type="checkbox"/> 12:30pm – 3:30pm <input type="checkbox"/> 3:30pm – 5:00pm <input type="checkbox"/> Anytime		
Email Address:			
The Contractor's Details			
Name:			
Address:			Postcode:
Phone:		Mobile:	
Email Address:			
Licence Number:		ABN:	
The Work			
Address where work has been undertaken ( <i>'as above' if same as your address</i> )			
Council Application Number ( <i>if applicable</i> )		Name of Local Council	
What work was done? ( <i>please provide a brief description eg, construction of a house, concrete driveway, erection of pergola, etc</i> )			
Did You...? Please tick one option and answer the questions in the column below			
<input type="checkbox"/> <b>Arrange to have the building work done?</b> <i>Please complete the questions below</i>		<input type="checkbox"/> <b>Buy the property after the building work was done</b> <i>Please complete the questions below</i>	
What is the value of the work under the agreement?	\$	When did you buy the property?	
How much have you paid	\$	Did you buy the property from an Owner-Builder?	YES NO
Do you have a written contract?	YES NO N/A <i>(If yes, please attach a copy)</i>	If so, what is the Owner-Builder Permit number?	
What is the date of your contract?		When was the building work done?	
When did work commence?		When was the work completed?	
What date was the work completed?		Do you have a Certificate for home warranty insurance or insurance under the Home Building Compensation Fund?	YES NO N/A
		Is this property part of a Strata Scheme?	YES NO



Are you a carer/advocate making a complaint on behalf of someone else? (required)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer
Were the products or services purchased through any of these funding schemes:	<input type="checkbox"/> NDIS <input type="checkbox"/> My Aged Care <input type="checkbox"/> Not Applicable

## Declaration

I declare that the information supplied by me is to the best of my knowledge, true and correct. I acknowledge that NSW Fair Trading may:

- Use information provided or later obtained to resolve, investigate or otherwise deal with the complaint, take enforcement action (if appropriate), and monitor the marketplace for investigative and law enforcement purposes; or
- Where more appropriate, refer the complaint and that information to the other party or another government agency, for the purpose of resolving the complaint.

<b>Signature:</b>	<b>Date:</b> /                    /
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**This complaint form must be lodged together with -**

- copies of plans and contracts
- copies of any correspondence between you and the contractor
- copy of certificate of home warranty insurance or insurance under Home Building Compensation Fund, if applicable
- copies of any available evidence, eg, photos, reports, etc.

**and mailed to your nearest Fair Trading Centre. (see list attached)**

**Please DO NOT send ORIGINAL documents: if they are required, Fair Trading will request them.**

*NSW Fair Trading is always looking for ways to improve our customer experience. You may receive a survey after your matter is finalised inviting you to provide feedback on our services.*

## Fair Trading Dispute Resolution Centres

[www.fairtrading.nsw.gov.au](http://www.fairtrading.nsw.gov.au)

<b>Albury</b> PO Box 1210 ALBURY NSW 2640	<b>Goulburn</b> PO Box 971 GOULBURN NSW 2580	<b>Queanbeyan</b> PO Box 1464 QUEANBEYAN NSW 2620
<b>Armidale</b> PO Box 641 ARMIDALE NSW 2350	<b>Grafton</b> PO Box 362 GRAFTON NSW 2460	<b>Tamworth</b> PO Box 1062 TAMWORTH NSW 2340
<b>Bathurst</b> PO Box 22 BATHURST NSW 2795	<b>Lismore</b> PO BOX 83 LISMORE NSW 2480	<b>Tweed Heads</b> PO Box 822 TWEED HEADS NSW 2485
<b>Broken Hill</b> PO Box 786 BROKEN HILL NSW 2880	<b>Newcastle</b> PO Box 835 NEWCASTLE NSW 2300	<b>Wagga Wagga</b> PO Box 623 WAGGA WAGGA NSW 2650
<b>Coffs Harbour</b> PO Box 4089 COFFS HARBOUR JETTY NSW 2450	<b>Orange</b> PO Box 2285 ORANGE NSW 2800	<b>Wollongong</b> PO Box 5275 WOLLONGONG NSW 2520
<b>Dubbo</b> PO Box 584 DUBBO NSW 2830	<b>Parramatta</b> PO Box 972 PARRAMATTA NSW 2124	
<b>Gosford</b> Locked Bag 2906 CENTRAL COAST MC NSW 2252	<b>Port Macquarie</b> PO Box 1747 PORT MACQUARIE 2444	

<p><b>Need more help?</b> If you require help in another language please contact the Telephone Interpreter Service on 13 14 50. Our TTY phone for the hearing impaired is (02) 9338 4943.</p>
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