COMPLIMENT LODGEMENT FORM



Important Information

The Gold Coast Waterways Authority is committed to providing a quality service to our customers. Your compliment is appreciated and will be forwarded to the relevant area as soon as possible.

1. Personal deta	ils (Optiona	al)				
Title:	☐ Mr ☐	☐ Mrs ☐ Ms	☐ Miss ☐	Other		
Family Name:						
Given Names:						
Company:						
2. Contact details						
Current Residential Address:						
					Postcode:	
Mailing Address: (If different to residential address)						
					Postcode:	
Email:						
Telephone:					Mobile:	
Preferred Contact Method:		☐ Telephone	☐ Mobile	Letter	☐ Email	☐ No contact required
3. Compliment details					<u> </u>	
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This form can be submitted to the Gold Coast Waterways Authority via: Email: mail@gcwa.qld.gov.au						
Office use only			2 2 2 3 4 2 2 3			
Registration Num	ber:		Action C	fficer:		
	ate:		Po	sition:		
Compliment lodged via: Telephone In person In writing						
Note:			•			

Privacy Notice

