



My Turriff

COMPLAINT ENQUIRY FORM

Unique Reference Number:

Date of referral

Method of referral

Website Telephone Email Letter In person

Referral received by

COMPLAINANT DETAILS

Full name	
Organisation (<i>if applicable</i>)	
Address including postcode	
Email address	
Landline	
Mobile	
Choose type of complainant	<ul style="list-style-type: none">• Affected party• Representative Group (public interest)• Third party (accuracy)
Preferred means of contact	<ul style="list-style-type: none">• Email• Telephone• Letter• Through agent only
Adjustments required (<i>e.g. the complainant is hard of hearing and needs written communication</i>)	



My
Turriff

ARTICLE DETAILS

Name of publication	
Headline of published article	
Link, reference to or copy of offending publication	

COMPLAINT DETAILS

Summary of complaint (50 words)

Reference to specific phrases/words or sections of the article that the complainant believes to be in breach of the Standards Cod

Standards Code clauses that the complainant believes to have been breached

Outcome or remedy requested