



COMPLAINTS FORM

This form is to be completed if you wish to complain to ARITA about the conduct of one of its members. You can attach documents to this form.

The completed form and any documents can be sent to ARITA at the address below or by email to complaints@arita.com.au. Please contact ARITA on 02 8004 4344 if you wish to discuss your concerns before making a complaint.

Attached to this form is a statement of the ARITA complaints processes. Please read this so that you understand what to expect and what avenues are open to ARITA.

About you

Your name:
Your phone number:
Your email address:
Name of your company/business:
Address:
ACN, if any:
Your relationship to the company: Director Creditor Employee Customer Shareholder Other (please give details):

In order for ARITA to properly investigate your complaint, we need to contact the ARITA member you are complaining about and show them the information you have provided. We assume you agree with this. If you do not, please explain why.

About the insolvency practitioner

Appointees Name and Firm:

Address:

Phone number:

Briefly, what is your complaint about?

Details of your complaint

Describe how and when the events happened that you are complaining about?

Have you spoken to the practitioner concerned? If yes, what was said?

Have you commenced any legal action?

Have you taken other action, for example referred the complaint to ASIC, AFSA, the CAANZ or CPA Australia?

Other comments: