

Form No.: CPA/FOR/010	Form Name: CONSUMER ACTION FORM	Revision No.: 0	Page 1 of 2
Original Issue Date: 2018-Sept-10	Approval By: Top Management	Revision Date: None	

OUR Reference _____

Utilities customers **must** complete all stages of Digicel, Flow, JPS and NWC’s complaints handling procedure before your Consumer Affairs Office at the Office of Utilities Regulation (OUR) can investigate the complaint. Please remember that a copy of the utility’s final written answer is needed.

Use this form to tell us about your complaint. If you have difficulties completing it, please call us at **888-225-5687**.

First name _____	Title (Ms., Mr., Mrs.) _____
Surname _____	
Service Address _____ _____ _____	Postal Address (if different, from Service Address) _____ _____ _____
Reference Number from the utility	
Telephone number (Home) 876 - _____ - _____	Telephone number (Mobile) 876 - _____ - _____
Email Address (Primary) _____	

1. Which utility are you complaining about?

Utility Provider _____
Account Number _____

2. Have you already complained to the utility? Yes No

If yes, when did you complain to the utility? _____ (YYYY/MM/DD)
 The utility has up to thirty¹ (30) working days from this date to send you its final written answer.
If no, please contact the utility provider.

3. Have you received a final written answer?

Yes No

Insert utility’s written answer below, if form is being completed online. If the form is being posted, please attached the utility response and submit along with this form.

¹ Conditions apply.

Form No.: CPA/FOR/010	Form Name: CONSUMER ACTION FORM	Revision No.: 0	Page 2 of 2
Original Issue Date: 2018-Sept-10	Approval By: Top Management	Revision Date: None	

4. Has there been any court action relating to your complaint (or is any planned)?
 Yes No

Please note: we cannot investigate a complaint that is before the courts or other regulatory agencies (e.g.: Consumer Affairs Commission)

When did the issue you are complaining about take place? _____ (YYYY/MM/DD)

5. Please describe briefly your complaint - what happened? **Write on a separate sheet.**
6. Please explain briefly, why you are not satisfied with the written response received from the utility, and what do you think should be done to resolve the issue. **Write on a separate sheet.**
7. If anything makes it difficult for you to use our services, for example, a disability, please note it in the box below.

Declaration

Please read this declaration carefully.

- i. I would like the Office of Utilities Regulation to look into my complaint;
- ii. To the best of my knowledge, information and belief, everything I have told you is correct;
- iii. I understand that to help resolve my complaint, you will need to use and keep personal information, for example contact and complaint details;
- iv. I understand that this may include collecting all available information related to my account from the utility providers; and
- v. I understand that you may publish final decisions through various media - with consumer details removed to protect my identity.

Please confirm by ticking the boxes, which you agree:

- To the declaration above. *(Please note, the OUR will not handle your complaint unless you agree to the declaration above.)*
- To speak to us on the phone and understand that our calls may be recorded for quality control purposes.
- For us to contact you for your feedback about our services. Having consumer feedback on our services is essential for helping to improve what we do. Giving feedback is completely optional.

You can withdraw your consent at any time by sending us a written request. You can also ask us to delete your personal information from our database or to restrict or object to how we use it by written request.

 Signature

 Date (YYYY/MM/DD)

Please return this form via fax at 876-929-3635 or email to consumer@our.org.jm or post to:

Office of Utilities Regulation
 3rd Floor - PCJ Resource Centre
 36 Trafalgar Road, Kingston 10