

Tact Tech Security Solutions



Formal Complaint Form

Your feedback is important to us. Please complete this form if you would like to file a formal complaint. All complaints will be reviewed by management in a timely and professional manner.

1. Complainant Information

- **Full Name:** _____
- **Phone Number:** _____
- **Email Address:** _____
- **Are you a:**
 - ☐ Resident
 - ☐ Client
 - ☐ Employee
 - ☐ Vendor
 - ☐ Other (Please specify): _____

2. Date and Time of Incident

- **Date of Incident:** _____
- **Time of Incident (if known):** _____

3. Location of Incident

- ☐ Gatehouse
- ☐ Patrol Area
- ☐ Clubhouse or Amenities
- ☐ Office
- ☐ Other (Please specify): _____

4. Individual(s) Involved (If Known)

- Name(s) or Description:

5. Description of Complaint

Provide a detailed description of the issue, including what occurred, who was involved, and any relevant details or statements made. Please be as specific as possible.

6. Witnesses (if applicable)

- Name(s) or Description(s):

7. Supporting Evidence (Optional)

☐ I am attaching photos, screenshots, or other documents to support my complaint.

(If submitting digitally, please email attachments to **admin@tacttechsecurity.com** with your name in the subject line.)

8. Desired Resolution or Outcome

What would you like to see happen as a result of this complaint?

9. Declaration

I declare that the information I have provided is true and accurate to the best of my knowledge. I understand that knowingly submitting false information may result in dismissal of this complaint and, if applicable, disciplinary action.

- **Signature:** _____
- **Date:** _____