

Tel: **01803 832212** Fax: **01803 837917**

Complaints Form.

If you have a complaint, please fill in this form with as much detail as possible and send it to the following address: -

Complaints Manager/Operations Manager, Dartmouth Medical Practice, 35 Victoria Road, Dartmouth, TQ6 9RT

Name:		
Address:		
Date of Birth:		
Usual GP:		
Details of Complaint: (Including date(s) of event(s) and person(s) involved):		
Signature:	Date:	

Continue overleaf if necessary...