

Roggeveld Wind Power GRIEVANCE FORM

Register Number: _____ Date: _____

Name: _____ Surname: _____

Address: _____ Contact Number: _____

Community Organisation: _____

NATURE OF COMPLAINT, CAUSE AND DATE OF GRIEVANCE:

Signed by Complainant: _____ Date: _____

Signed by CLO: _____ Date: _____

AGREEMENT OR SETTLEMENT OF GRIEVANCE OR REASONS FOR FAILURE TO REACH

AGREEMENT:

Community Member Signature: _____

