



COMPLAINT AGAINST A FRANCHISE ASSOCIATION MEMBER

Complainant Contact Details:

Name: _____

Address: _____

Tel: _____ Fax: _____

Mobile: _____ Email: _____

Franchise Association Member against which the complaint is being made:

Name: _____

Brief Description of Alleged Misconduct or Breach:

Continue on a separate page if necessary.

Using the Association's Codes and /or Rules identify which Rule/s and/or section/s of the codes have allegedly been breached:

Have you formally notified the Member of this complaint? Yes ___ No ___

Has the Member responded to your notification?
(If yes, please attached the response to this form). Yes ___ No ___

Have you referred the complaint to any other body? Yes ___ No ___

Have legal proceedings commenced? Yes ___ No ___

I acknowledge that the Franchise Association of New Zealand complaints process does not provide for monetary recompense.

I agree that the member may provide my personal information to the Franchise Association of New Zealand when responding to this complaint.

Signature of Complainant: _____

**Please ensure you provide a copy of your franchise agreement with your documents.*