



GRADY'S est. 1891

FAMILY FUNERAL DIRECTORS & CONSULTANT MONUMENTAL MASONS



"Our family helping yours"

Complaints Form

Please read our Complaints Policy carefully before you fill in and return this form.

1. Your Details

Give your details below. If an email address is given, we will send you information by email only, unless you ask us specifically to send correspondence by post (which we are happy to do)

Your full name:

Address:

Daytime phone number (optional) :

E-mail address if you have one:

Are you the client? (*The client is the person who completed the funeral arrangement paperwork*)
please indicate by stating YES or NO:

If NO, please state relationship to the deceased.

As you are not the client please attach written authorisation from the client that they are happy for you to proceed on their behalf.

2. Details of the deceased

Name of the deceased:

Date of death:

Place of death:

The date of the funeral:

DEDICATED CHAPELS OF REST

23 Mengham Road, Hayling Island PO11 9BG

PHONE 023 9246 3828 EMAIL gradys@gradysfamilyfd.co.uk

www.gradysfamilyfd.co.uk

3. Dispute Details

In the space below, please tell us what went wrong. If you need more space please attached additional pages.

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4. What would you like the company to do? (Tick all the boxes that apply)

Give you an apology		Give you an explanation	
Take some action		Please specify what action you would like taken:	
Offer a full refund / part refund/ make a donation to charity		How much? Which charity?	£

5. Any further comments / information relevant to the complaint

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6. Client Declaration:

Please read the statements below before signing the form.

- I have read and understand Grady's Family Funeral Directors Complaint Procedure
- I acknowledge that my complaint will be fully investigated within 10 working days and I will receive a written reply with the outcome (by email or letter) within 10 working days of receipt of my complaint.
- Whilst my complaint is being investigated I will refrain from making any comments on social media about the complaint which could be damaging to the funeral director.

Please enter your name:

Date:

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