

## SUNSTATE STRATA COMPLAINT FORM

Sunstate Strata  
5/25 Seaside Blvd  
Marcoola QLD 4564  
Phone: 075450 5300  
Email: [complaints@sunstatestrata.com.au](mailto:complaints@sunstatestrata.com.au)  
Website: [www.sunstatestrata.com.au](http://www.sunstatestrata.com.au)

---

### COMPLAINANT DETAILS

Full Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Body Corporate: \_\_\_\_\_  
Lot/Unit Number: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

---

### COMPLAINT DETAILS

Date of Incident: / /  
Time (if applicable): \_\_\_\_\_  
Location of Incident: \_\_\_\_\_  
Description of Complaint:

---

---

---

Have you attempted to resolve this issue directly? (e.g., discussing with the party involved)

Yes

No

If yes, please provide details:

---

---

Supporting Evidence (if any): (Please attach photos, emails, or other supporting documents)

---

---

Preferred Resolution/Outcome Sought:

---

---

---

**DECLARATION**

I declare that the information provided in this complaint form is true and correct to the best of my knowledge.

Signature: \_\_\_\_\_

Date: // \_\_\_\_\_

---

**OFFICE USE ONLY**

Complaint Received By: \_\_\_\_\_

Date Received: // \_\_\_\_\_

Action Taken:

---

---

Follow-up Required:

Yes

No

Handled By: \_\_\_\_\_

Date: // \_\_\_\_\_

---

**Privacy Notice:**

Your personal information will be kept confidential and used only for the purposes of investigating and resolving your complaint.