Environmental Health Complaint Form

This form is to be used for complaints regarding environmental health issues including Foodborne illness and unsafe food, dust, smoke and odour issues, mosquitoes and other pests or any other general health complaint. For noise compaints please use the separate Noise Complaint form.



PO Box 614 Kununurra 6743 20 Coolibah Drive KUNUNURRA

Koolama Street WYNDHAM

T | 9168 4100

F | 9168 1798

E | mail@swek.wa.gov.au

W | www.swek.wa.gov.au

8.00am - 4.00pm MON - FRI

Please provide as much detail as possible to allow conduct of a thorough investigation. All personal details will remain confidential. An Environmental Health Officer may need to contact you to confirm details of your complaint. You will be advised of the actions taken in response to your complaint as soon as possible.

1. COMPLAINANT			
Full name			
Postal address			
Residential address			
Phone number		Email	
2. OCCUPIER'S DETAI	LS (IF KNOWN)		
Full name			
Residential address			
Phone number			
3 . NATURE OF COMP	LAINT		
			OFFICE USE ONLY Date Received
Complainant Signatur	re Date /	/	Document No File PH 10.3

Officer