



NAME					
ADDRESS					
TELEPHONE					
EMAIL ADDRESS					
ENERGY TYPE	GAS		/	ELECTRICITY	
I HAVE COMPLETED THE COMPLAINTS PROCESS OF:	ESB NETWORKS	<input type="checkbox"/>	GO POWER	<input type="checkbox"/>	
	GAS NETWORKS IRELAND	<input type="checkbox"/>	JUST ENERGY	<input type="checkbox"/>	
	BE ENERGY	<input type="checkbox"/>	PANDA POWER	<input type="checkbox"/>	
	BORD GÁIS ENERGY	<input type="checkbox"/>	PINERGY	<input type="checkbox"/>	
	ELECTRIC IRELAND	<input type="checkbox"/>	PREPAYPOWER	<input type="checkbox"/>	
	ENERGIA	<input type="checkbox"/>	SSE AIRTRICITY	<input type="checkbox"/>	
	FLOGAS NATURAL GAS	<input type="checkbox"/>	VAYU	<input type="checkbox"/>	
COMPLAINT REFERENCE NUMBER*					
* The number issued by your supplier or network operator in relation to your complaint. Please note: the CRU cannot handle your complaint until you have completed their complaint process.					
ACCOUNT NUMBER					
MPRN OR GPRN					
MY COMPLAINT IS ABOUT	BILLS	<input type="checkbox"/>	HIGH CONSUMPTION	<input type="checkbox"/>	
	CHARGES	<input type="checkbox"/>	METER READING	<input type="checkbox"/>	
	CUSTOMER SERVICE	<input type="checkbox"/>	OPENING/CLOSING ACCOUNT	<input type="checkbox"/>	
	DEPOSIT	<input type="checkbox"/>	PAYMENT METHODS	<input type="checkbox"/>	
	DISCONNECTION	<input type="checkbox"/>	SWITCHING	<input type="checkbox"/>	
	FAULTY METER	<input type="checkbox"/>	OTHER:	<input type="checkbox"/>	
SIGNED BY COMPLAINANT					
<ul style="list-style-type: none">• I confirm that this represents my complaint to the CRU.• I confirm that I have completed my supplier or network operator's complaints handling process.• I agree that a copy of my complaint and copies of any accompanying or additional correspondence or documentation submitted to the CRU in relation to my complaint may be provided to relevant organisations for the purpose of carrying out an investigation, including the body against which I am complaining.• I agree that as part of their investigation into my complaint, the CRU may request any records and information relating to my account from the relevant supplier or network operator.					
Signature:					
Date:					
The CRU Privacy Notice sets out how we protect the privacy rights of individuals and can be found here					



- Please use this form to summarise your complaint and add additional pages if you do not have enough space to explain your complaint in full and your attempts to resolve the complaint with your supplier or network operator.
- If you have any documents to support your complaints e.g. bills or copies of letters, please enclose these with this form.
- If you are not the account holder or a nominated representative on the account in question, please provide a signed document from the account holder, stating that you have permission to act on their behalf in relation to this complaint.
- The CRU is subject to the Data Protection Acts 1988 and 2003 (“Data Protection Acts”) and the Freedom of Information Act 2014 and the CRU may be required to grant access to data, information and records held by the CRU in relation to the Customer Care work area, and this may include Confidential Information.

HOW WOULD YOU LIKE YOUR COMPLAINT RESOLVED?

SUMMARY OF YOUR COMPLAINT:



SUMMARY OF YOUR ATTEMPTS TO RESOLVE THE MATTER (PLEASE INCLUDE DATES AND NAMES OF PEOPLE SPOKEN TO IF POSSIBLE):
