

# COMMERCIAL RADIO CODES OF PRACTICE - LISTENER COMPLAINT FORM

All program content on this station (music, news, talk, advertisements, etc) is regulated by the *Commercial Radio Codes of Practice (Codes)*. The Codes also provide a complaints process through which any listener can make an official written complaint to a station if he or she reasonably feels that the station has broadcast a program which breaches the Codes.

On receiving a valid complaint, the relevant station must resolve the complaint by writing back to the complainant at the address supplied. A complainant that's not satisfied with that response is entitled to refer the matter to the Australian Communications & Media Authority (**ACMA**).

**You may use this form only if you wish to make a complaint to this station that a program we broadcast has breached the Codes.** For a copy of the Codes, visit [www.commercialradio.com.au](http://www.commercialradio.com.au) or contact this station on 02 6624 2433 during office hours.

*You must provide the information below so that we can process your complaint and respond to you as required by the Codes.*

*Please provide a summary of your complaint.*

A. PERSONAL INFORMATION	C. SUMMARY OF COMPLAINT
Title (e.g. Mr/Mrs) <input style="width: 50px;" type="text"/> Surname <input style="width: 150px;" type="text"/>	<div style="border: 1px solid black; height: 20px;"></div>
Given Names <input style="width: 250px;" type="text"/>	<div style="border: 1px solid black; height: 20px;"></div>
Address <input style="width: 350px;" type="text"/>	<div style="border: 1px solid black; height: 20px;"></div>
State/Territory <input style="width: 100px;" type="text"/> Post Code <input style="width: 100px;" type="text"/>	<div style="border: 1px solid black; height: 20px;"></div>
Phone: (optional) <input style="width: 100px;" type="text"/> Fax (optional) <input style="width: 100px;" type="text"/>	<div style="border: 1px solid black; height: 20px;"></div>
 <i>You must provide the information below so that we can carry out our internal investigations to identify the program complained about. <b>Your complaint cannot be made more than 30 days after the broadcast.</b></i>	<div style="border: 1px solid black; height: 20px;"></div>
B. COMPLAINT INFORMATION	<div style="border: 1px solid black; height: 20px;"></div>
Name of Station <input style="width: 100px;" type="text"/> Listening Area <input style="width: 100px;" type="text"/>	<div style="border: 1px solid black; height: 20px;"></div>
Name of Program <input style="width: 300px;" type="text"/>	<div style="border: 1px solid black; height: 20px;"></div>
Time of Broadcast <input style="width: 80px;" type="text"/> Date of Broadcast <input style="width: 80px;" type="text"/>	<div style="border: 1px solid black; height: 20px;"></div>
Complaint Issue <input style="width: 300px;" type="text"/>	<div style="border: 1px solid black; height: 20px;"></div>
Code Provision (if known) <input style="width: 250px;" type="text"/>	<div style="border: 1px solid black; height: 20px;"></div>
 <b>Please sign the form and send it to this station using the contact details below</b>	<div style="border: 1px solid black; height: 20px;"></div>
<b>Signature</b>	<b>Date</b>

**FAX COMPLETED FORM TO: "Attention: Station Manager", 02 6624 3598; or POST TO: "2LM/ZZZ Station Manager, PO Box 44, LISMORE, NSW, 2480"**