

Baleh HEP Grievance Form

Grievance No.:		Date:	
(To be filled by Project Services, Baleh HEP)			

Name:		IC No./	
		Passport No. :	
Address:		Contact No. :	
		Email :	
Nature of		Company/	
Grievance:		Department	

Provide details of the grievance:

Suggestion (s):

Preferred Form of	
Communication:	
Signature: Date:	
Date:	

THANK YOU

For Office Use:			
Stakeholder	Community	Contractors	
Reference:	Government (Federal)	Others (please specify)	
	Government (State)		
	NGO		_
Comments:			