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Complaints lodging form

Ref. no _____

1. Complainant's Details (all information given is voluntary)

Name (Dr / Mr / Mrs / Ms)

ID Number _____

Postal address _____

Mobile _____

Email _____

County _____

Age _____

2. How did you get to know about the institution's complaints mechanism?

Newspaper

TV/Radio

Referral by friend

Other (please specify) _____

3. Which public institution or public officer are you complaining about?

Ministry/department/agency:

4. Have you reported this matter to any other public institution/ public official?

Yes

No

5. If yes, which one?



6. Has this matter been the subject of court proceedings?

Yes

No

7. Please give a brief summary of your complaint and attach all supporting documents [Note to indicate all the particulars of *what* happened, *where* it happened, *when* it happened and by *whom*]

8. What action would you want to be taken?

Signature _____

Date _____