



## **Botswana Telecommunications Authority**

### **Department of Compliance and Consumer Affairs**

#### **COMPLAINT FORM**

1. Kindly complete this form to register your complaint
2. Please ensure you complete all spaces provided
3. Make sure your complaint is constructive. Include a brief statement of facts in chronological order and points at issue. The BTA reserves the right not to investigate a complaint that is abusive or offensive. To help ensure that your complaint results in a fair and speedy solution, the complainant is asked to show a genuine willingness to resolve the complaint by dealing with this office in a cooperative and reasonable manner.
4. Supporting documents and relevant information should be enclosed and these include but are not limited to; letters, contract or agreement and proof related to the complaint.
5. The complainant shall indicate the remedy sought from the service provider. The remedy sought should be reasonable and realistic.
6. Please note that personal information supplied by you will be provided to the service provider concerned.
7. Case number shall be quoted on all subsequent correspondence regarding this matter.
8. If the space provided is insufficient, please continue on a separate sheet of paper. Any separate sheet of paper used should be attached to this form.
  - a) Having completed the form the complainant shall sign it personally. In case of corporate body, authorized personnel shall sign this form accordingly.
  - b) The form shall be delivered to the BTA office either by hand /post /fax to the Executive Chairman, Botswana Telecommunications Authority P/Bag 00495 Gaborone. Fax: 3957976, email: [www.bta.info.bw](http://www.bta.info.bw)



**BOTSWANA TELECOMMUNICATIONS AUTHORITY**

**COMPLAINT FORM**

**1. PARTICULARS OF COMPLAINANT**

First Name: .....

Surname: .....

ID No. / Company  
Registration No. ....

Telephone/Cell phone:  
Contact Fax No: .....

E-mail Address: .....

**2. PARTICULARS OF SERVICE PROVIDER**

Name of Company .....

Business Address .....

Telephone .....

Fax No .....

E-mail Address .....

**3. COMPLAINT DETAILS**

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.....  
.....  
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Supporting  
Documents.....

.....

Remedy Sought.....

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4 COMPLAINT DECLARATION

I / We hereby declare that the information provided is true.

Date.....

Signature(s).....