RIETKLOOF WIND FARM (RF) PTY LTD GRIEVANCE FORM

Grievance Number:	Date:
Name:	Surname:
Address:	Contact Number:
Community Organisation:	
NATURE OF COMPLAINT, CAUSE AND DATE OF GRIEVANCE:	
	·
SETTLEMENT DESIRED:	
Signed by Complainant:	Date:
Signed by CDM:	Deter
Signed by CRM:	Date: