



Complaint Submission Form

Avaya SIP Trunking

Instructions: Please complete this form and ensure that all writing is in print lettering as we may not be able to process your complaint if we can't read

Customer / Company name		
Your Name (if different from Customer name or Company name), relationship to customer or title		
Service address (address where the service is being provided) Street Address, Unit		
City/Town	Province	Postal Code
Contact Numbers where we can reach you		
Number:	Email:	
What is your complaint about?		
<input type="checkbox"/> Billing Error – Please enter the amount you are disputing. \$ _____		
<input type="checkbox"/> Contract		
<input type="checkbox"/> Service Delivery		
<input type="checkbox"/> Transfer of Service		
<input type="checkbox"/> Legal		
<input type="checkbox"/> Other*: _____		
Please provide the details of your complaint.		

Signature

Date (DD/MM/YYYY)

Please submit the completed complaint form to CLOUDCOMPLAINT@AVAYA.COM

Upon receipt of the complaint form, we will review and provide you with a complaint tracking number. The complaint process begins the next business day following receipt of the complaint.