**SAMPLE GRIEVANCE LOG**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Ref Number** | **Date** | **Name of complainant** | **Gender** | **Address** | **Phone Number** | **Summary of complain** | **Signature** |
|  |  |  |  |  |  |  |  |
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**Annex 1: Complaint receiving form**

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| **GRM 01; Complaint Receiving Form** | | | | | | | | | | |
| Date: ……………………… (dd/mm/yyyy) | Location of complaint  ………………............................................................................................................................................................................................ | | | | | | | | | |
| Complaint no.: ………… |
| **Mode of lodging the complaints**  **(please tick as applicable):** | Writing (letter) |  | Verbal complaint |  | Phone call |  | Email |  | Surface mail, suggestion box, others |  |
| **Details of the Complainant: (Add to category of complainant – affected person, intermediary (on behalf of the affected person), civil organization, service organization, others (specify))** | | | | | | | | | | |
| Name (optional): ………………………………………  Address: ………………………………………………………………………….  Phone no.: …………………………….. Gender: …………………  Email address: ………………………….. | | | | | | | | | | |
| **Location of complaint/concern:** | Village/Town/City/Area: ………………………………………………………….....  ……………………………………………………………..  State: …………………………………. | | | | | | | | | |
| **Category of Complainant (please tick as appropriate):** | Power consumer [ ]  Genco [ ]  Disco [ ]  Regulator [ ]  TCN [ ]  Others…………………………………………………………………. | | | | | | | | | |
| **Category of Grievances**  **(please tick as appropriate):** | 1. Project implementation related [ ] 2. Social [ ] 3. Environment [ ] 4. Gender-Based grievance [ ] | | | | | | | | | |
| **Brief Description of the Grievance:**  ……………………………………………………………………………………………………………………  ……………...............................................................................................................................................................  ……………………………………………………………………………………………………………………  ……………...............................................................................................................................................................  (Attach letter/petition/documents detailing grievance information as submitted) | | | | | | | | | | |
| Received/prepared  by: (position, name of the receiving office)……………………............................ | Signature: ……………………………… | | | | | Date:………………..…………………………. (dd/mm/yyyy) | | | | |

**Annex 2: GRM/002; Acknowledgement Receipt Form**

**Complaint no**.: ………………………………………………..

**Date of complaint**: ………………………………….………….

(*dd/mm/yyyy*)

**Location of complaint:**

Village/Town/City/Area: ……………………………………………

State: ……………………….……………………………….

**Details of the Complainant:**

Name: ……………………………………….

Address: ………………………………….....

Email address: …………………………….

Age: ……………………………………….

Gender: ……………………………….....

Phone no.: ………………………………

**Attachment/Supporting documents submitted:**

1. ……………………………………………………………………………………..
2. ……………………………………………………………………………………..
3. ……………………………………………………………………………………..
4. ……………………………………………………………………………………...
5. ………………………………………………………………………………………

**Summary of complaint:**

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Name of Officer receiving Complaint:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Officer receiving Complaint:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Annex 3: GRM 03; Meeting Record Structure Form GRM 03**

**(Grievance Redress Committee & Other Meetings)**

Date of Meeting: ……………….……… Complaint no.: …………….………Venue of Meeting: ……………………….

**List of participants:**

|  |  |
| --- | --- |
| **Complainant Side** | **Grievance Redress Committee** |
|  | **Members** |
| 1) | 1) |
| 2) | 2) |
| 3) | 3) |
|  |  |

**Summary of Grievance**:

……………………………………………………………………………………………………………………………………………………

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**Key discussions:**

1)

2)

3)

4)

5)

**Decisions Made/Recommendations by the Grievance Redress Committee:**

1)

2)

3)

**Status of Grievance (tick where applicable):**

|  |  |  |  |
| --- | --- | --- | --- |
| **Resolved** |  | **Unresolved** |  |

Chair person’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chair person’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date (dd/mm/yyyy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Annex 4: GRM 04; Standardized disclosure Form**

**Location**

Village/Town/City/Area………………………… State…………………

**Outcome of Grievance Redress**

1. Complaint no.
2. Name of Complainant:
3. Date of Complaint:
4. Summary of the Complaint:

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1. Summary of Resolution:

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1. Level of Redress (please tick where applicable)

|  |  |  |  |
| --- | --- | --- | --- |
| Local Level |  | National Level |  |

1. Date of grievance redress (dd/mm/yyyy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of complainant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of the Complainant, indicating acceptance of the solution to his/her grievance:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Grievance Handling Officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Grievance Handling Officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date (dd/mm/yyyy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Note: Copy to be sent to the complainant and the PMU Office)*

**Annex 5: GRM 05; Quarterly Report of Registered Complaints Form**

Location ……………………. Date (dd/mm/yyyy) ………………….

Period (Quarter ending) ………......................

1. **Details of Complaints Received:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Place of issuing** | **Name &** | **Location of** | **Date of Receipt** | **Complaint no.** |
| **complaint** | **Address of** | **complaint/concern** |  |  |
|  | **complainant** |  |  |  |
|  |  |  |  |  |
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1. **Details of Grievance Redress Meetings:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of meeting** | **Venue of meeting** | **Names of** | **Decisions/Recommendations** |
|  |  | **participants** | **Made** |
|  |  |  |  |
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1. **Details of Grievances addressed:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date of issuing** | **Category of** | **Category of** | **Brief description** | **Date of** |
| **complaint** | **complaint** | **grievance** | **of grievance** | **Complete** |
|  |  |  |  | **resolution** |
|  |  |  |  |  |
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