

Locumcheck Ltd
Specialist in Medical Locums
13 Upper Baggot Street road,
Second Floor,
Dublin 4
Ph: 01-6854700
Fax: 01-6852538
Web: www.locumcheck.com



Locumcheck

Date _____

Ref# _____

COMPLAINT FORM

Name (Doctor/Hospital) _____

Contact Details _____

Complaints Against 

- 1- Coordinators Section

- 2- Non payments/Disputed payments

- 3- Communication Error

- 4- Accounts

- 5- Others

Comments / Suggestions

By email _____ Phone _____ Fax _____

FOR OFFICE USE ONLY

Matter Investigated By _____ Discussion with Director _____

Out Come

Return Call / E-mail to Client (Yes) (No)