

# Payphone complaints form



## Instructions for completion

- > Please print clearly. Illegible, unclear or incomplete application forms may delay processing.
- > Please include your name on any documents you have provided with this complaints form.

### **Please make sure you have:**

- > Included everything you want to tell us about your complaint.
- > Enclosed additional documents as stated.
- > Signed the declaration.

### **Where to send this form**

The Manager  
Telecommunications Compliance and Enforcement Section  
Australian Communications and Media Authority  
PO Box 13112 Law Courts  
Melbourne VIC 8010

Phone: 1300 850 115

Fax: (03) 9963 6899

Email: [ConsumerInterests@acma.gov.au](mailto:ConsumerInterests@acma.gov.au)

## Notes

- > Telstra is legally responsible under the Universal Service Obligation (USO) to ensure all people in Australia have reasonable access on an equitable basis to payphones, regardless of where they reside or conduct their business. How Telstra meets this obligation is set out on its website: <https://www.telstra.com.au/consumer-advice/payphones>.
- > The ACMA is responsible for investigating complaints about Telstra's process for removing payphones. However, your complaint must first have been finalised through Telstra's complaints process. If your complaint has been through that process and you are not happy with the final response, you can ask the ACMA to investigate if you believe that Telstra has not complied with its obligations under the USO.
- > To request a review of your complaint by the ACMA, please fill in the form below. If you need help filling out the form, please contact the ACMA on 1300 850 115.

## Your details

### Your name

SURNAME
GIVEN NAMES
TITLE

### Address

POSTCODE

### Contact details

TELEPHONE (   )
MOBILE
FACSIMILE (   )
EMAIL
PREFERRED METHOD OF CONTACT: PHONE/EMAIL/POST

PLEASE NOTE: ACKNOWLEDGEMENT AND FINAL NOTIFICATIONS WILL BE POSTED TO YOU.

## Payphone details

### Payphone address

POSTCODE

### Brief description of location

INSIDE/OUTSIDE

### Cabinet number (if known)

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**Details of complaint**

When you submitted your complaint to Telstra, was it by:

- Telephone       Fax       Letter       Email

If you ticked fax, letter or email, are you able to provide a copy of your original complaint?

- Yes, attached       Yes, at a later stage       No

If you contacted Telstra by phone or are unable to provide a copy of your original complaint, please provide a summary below:


Was there any further contact between you and Telstra about your complaint (for example, letters, emails, phone calls, or meetings)? Please provide details below or copies where possible. If you run out of space, please attach an additional piece of paper (stating your name and the question).


Did Telstra give you a final response?

- Yes       No

If yes, was this response delivered by:

- Telephone       Fax       Letter       Email

If you ticked fax, letter or email, are you able to provide a copy of your original complaint?

- Yes, attached       Yes, at a later stage       No

If Telstra contacted you by phone or you are unable to provide a copy of a written response, please provide a summary of the response below:


Why were you dissatisfied with this response?


**Consent to handle this complaint and use information**

I \_\_\_\_\_ (insert full name here) would like the Australian Communications and Media Authority to consider my complaint. I confirm that all the information I have given to you is true and accurate to the best of my knowledge at the time of submitting this complaint. I understand that in assessing my complaint you may need to:

- > handle personal details about me that I have provided, including sensitive information, in order to deal with my complaint effectively
- > exchange information with Telstra about my complaint
- > correspond with me to clarify or provide further information
- > publish examples of complaints to help others in requesting the ACMA's services in this area, but that my personal information will not be published.

Note: The details you provide in completing the ACMA forms, such as your name, email address, telephone or fax number, are only used for the purposes associated with this form unless required or authorised by law. The ACMA will not use your details for any other purpose not included in this consent. You may refer to our Privacy policy for more information.

SIGNATURE	
PRINT FULL NAME	DATE

**ACMA USE ONLY**

Our reference

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Date received

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