

Note: A verbal complaint can also be submitted by calling the service quality and complaints commissioner

## USER'S IDENTIFICATION (MANDATORY)

First name:	_____	Family name:	_____
Address:	_____	City:	_____
Postal code:	_____	Telephone:	_____
Email:	_____		
Date of birth:	_____	User's file number if known:	_____

## IDENTIFICATION OF COMPLAINANT (IF DIFFERENT FROM USER)

First name:	_____	Family name:	_____
Address:	_____	City:	_____
Postal code:	_____	Telephone:	_____
Email:	_____	Relationship to user:	_____

## SIGNATURE

Signature of user or complainant: \_\_\_\_\_ Date: \_\_\_\_\_

### FORWARD YOUR SIGNED FORM TO

Office of the service quality and complaints commissioner

1, 9<sup>e</sup> Rue  
Rouyn-Noranda (Québec) J9X 2A9  
**Toll free: 1 888-764-5531**

[www.ciSSsat.gouv.qc.ca](http://www.ciSSsat.gouv.qc.ca)  
[ciSSsat.info.plaintes@ssss.gouv.qc.ca](mailto:ciSSsat.info.plaintes@ssss.gouv.qc.ca)

### TO BE ASSISTED OR ACCOMPANIED

You can, at any time, be assisted or accompanied at no charge, in the complaint process by a counselor from *the Centre d'assistance et d'accompagnement aux plaintes de l'Abitibi-Témiscamingue* (Federation of complaint assistance and support system): 1 877-767-2227 or by a member of your user's committee.

## ON LINE FORM

<https://www.ciSSs-at.gouv.qc.ca/question-commentaire-plainte/>

