



Complaint Form / Concern Reporting

Personal Information

Form submitted by: _____

Mailing address: _____

Phone number: _____

Email address: _____

Funeral Services Business Information

My concern is with: _____

(Funeral Services Business Name)

Branch location: _____

Telephone number: _____

Name of person you were dealing with/speaking to: _____

Nature of concern/complaint

Is this concern regarding a funeral? Yes No

If yes, name of deceased: _____

Date of Death: _____ Date of Funeral: _____

Were you responsible for the funeral arrangements: Yes No

Is this concern regarding funeral goods or services? Yes No

Is this concern regarding a pre-need contract? Yes No

My concern is not listed above. My concern is regarding: _____

What steps have you taken to resolve the concern? Identify who you contacted

Have you filed or do you intend to file any other complaints or have you started any other proceedings concerning this complaint? If yes, please explain.

What would you like the business to do? How can this concern be resolved for you?

How did you hear about the AFSRB?

Please attach copies of any paperwork that is related to and supports your position (i.e. letters, emails, contracts, bill of sale, cancelled cheques, etc.).

Completed forms can be mailed to:

Complaints Investigator
Alberta Funeral Services Regulatory Board
180, 2755 Broadmoor Blvd.
Sherwood Park, AB T8h 2W7

E-mailed to: office@afsrb.ab.ca

Faxed to: (780)452-6085

Signature of complainant

Date

If this information was taken orally, the form was completed by:

Signature

Date