



Secure Parking Solutions Complaints Form

SPS Ref:

We are a private parking company, which aims to provide exceptional service to its clients across the U.K. We have a combined experience of year 20 years in the parking industry and understand your needs to provide our clients with the best solutions possible.

We follow the BPA's code of practice to ensure the highest level of service and compliance. We are dedicated in our work to provide our clients with a service, which is effective and reliable. We use the latest technology and management systems to clearly understand and solve the issues in car park. While doing so, if you think any of the following have created any problem for you, please fill the complaints form and we can ensure you that relevant action will be taken.

- Parking Attendant
- Appeals Department
- Administration team
- Payment system
- Company Policies
- ANPR System

Fill in this form clearly and remember to sign it and return it with copies of paperwork about your complaint.

Please do not send original documents.

Please note this is not an appeal form. If you have a grievance about a parking charge notice (PCN) then you need to consider appealing against the charge – not making a complaint. To make an appeal against the PCN, please login to www.secureparkingsolutions.zatappeal.com or if you don't have access to the internet, then please send a written appeal to:

**Appeals Dept, Secure Parking Solutions
Suite 2A, Blackthorn House, St Paul's Square,
Birmingham B3 1RL.**



Section 1

1. Were you issued with a parking charge notice (PCN)?				YES	NO
2. What is your PCN serial number?					
3. When was it issued?					
4. Location?					
5. Your vehicle reg?					
6. Why was it issued?					
7. Did you appeal against the PCN?				YES	NO
8. What was the outcome of your appeal?					
9. Are you satisfied with the outcome of the appeal				YES	NO
10. Did you consider using the POPLA?				YES	NO
11. Was your appeal responded within	0-14 days	14-28 days	28-35 days	Over 35 days	
12. Were you offered a further discounted rate if your appeal was rejected?				YES	NO
13. Was you made aware of the POPLA on your appeal rejection letter				YES	NO
14. Your complaining is against the:	Attendant	on-site staff	company policy	Other	
15. Did you interact with the parking attendant?				YES	NO
16. Was the parking attendant polite and informative?				YES	NO
17. Was the police involved in the issue you're raising.				YES	NO
18. If yes, please provide crime reference number or log number					
19. Did any other emergency service get involved?				YES	NO
20. If yes please provide details					
21. Do you have any evidence to support your complain. Please provide.				YES	NO



Section 2

Please give us your detailsand the details of anyone complaining with you.

Surname		Title			Title	
First name(s)						
PCN no.						
Vehicle reg.						
Address						
Tel						
Email						

If someone is complaining on your behalf (eg a solicitor or relative) please give us their details:

Name		Relationship to you	
Address			
Telephone			
Email			

If you're complaining on behalf of a business, charity or trust please fill in these details

Name of the organisation			
Address			
Tel		Email	
Why they are contacting on your behalf			



Section 5

How have you suffered as a result of what has happened?

Lined text area for Section 5 response.

Section 6

If we are able to take on your complaint, what outcome/result do you want us to achieve for you?

Lined text area for Section 6 response.

Section 7

Monitoring Information

We would be very grateful if you could fill in the anonymous diversity monitoring form below. We gather this information to help us ensure we are reaching as many people as possible. Collecting this information helps us check for and remove any barriers that could prevent people from using our service.

Any information you provide will be kept separate from your complaint form, has no effect on how we look at your complaint and will be stored anonymously on our secure database. Filling in the form is voluntary and we will not treat you less favourably if you choose not to return this form.

Thank you

Please choose one option from each of the sections listed below by ticking in the appropriate box.

Your Age

Under 18	18-24	24-30	30-40	40-50
50-60	60-70	70 or over	Prefer not to say	

Your Disability

Yes	No	Prefer not to say
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Your Gender

Male	Female	Prefer not to say
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Your ethnic group

Asian/ British Asian	Bangladeshi	Chinese	Indian	Pakistani
Black/ African/Caribbean/Black British			African	Caribbean
Mixed/ Multiple	White and Asian	White and Black African	White and Black Caribbean	Any other Mixed Background	
Other Ethnic Group		Arab	Any other group	
White	British	Gypsy	Irish	Any other white background	

Your religion or belief

Buddhist	Christian (All church, catholic, protestant and others)		
Hindu	Jewish	Muslim	No religion
Sikh	Others		Prefer not to say



Section 8

Declaration and Consent

- I'd like Secure Parking Solutions (SPS) to look into my complaint. To the best of my knowledge, all the information I've given you is accurate.
- I understand that SPS usually resolve complaints by phone letter and email.
- I understand SPS can use this form and it's supporting documents in court to pursue the outstanding charges.

Sign:..... Date:.....

Full Name:.....

You need to sign even if someone else is complaining on your behalf. This shows you have given them your permission to complain on your behalf.

Ready to send your form?

Checklist

- **Have you fully completed all section of the form?**
- **Have you included copies of all your supporting paperwork (in particular the appeal form evidence, receipt, etc.)**
- **If you plan to put your documents in date order, please put the most relevant documents first which are in relevant to this particular complaint or PCN.**



**Complaints Team
Secure Parking Services
Office 2A, Blackthorn House
St Paul's Square, Birmingham
B3 1RL**

