

**THE UNITED REPUBLIC OF TANZANIA
TANZANIA COMMUNICATIONS REGULATORY AUTHORITY
COMPLAINT FORM**



A: PARTICULARS

1. Name of Complainant/Operator _____

Address: _____

Occupation: _____

2. Name of Respondent: _____

Address: _____

Occupation: _____

B: NATURE/FACTS OF THE COMPLAINT

(State the facts disclosing the cause of action precisely and concisely)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

C: RELIEF (S) SOUGHT

D: VERIFICATION

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SIGNATURE OF THE COMPLAINANT