REGIONAL CORRIDOR DEVELOPMENT AUTHORITY (RECODA)

Form Ref. No. RCDA/IAR/F-023 (Rev. 1/2023)

COMPLAINT / INFORMATION FORM

Complaint/ Information No.	:				
Date	:				
Time	:				
COMPLAINANT INFORMATION					
Complainant / Information Category	:	(RECODA Personnel / Member of the Public)			
Name	:				
Identity Card Number / Passport Number	:				
Age	:				
Telephone Number (1)	:				
Mailing Address	:				
Email Address	:				
Occupation	:				
Agency / Company	:				
DETAILS OF COMPLAINT/INFORMATION					
Name of the perpetrator	:				
Agency / Company	:				
Date of Incident	:				

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Description of Complaint / Information	:				
Supporting Document(s)	: Yes / No	Yes / No			
Signature of Complainant			Signature of Receiving Officer		
TO BE FILLED BY RECEIVING OFFICER					
Source(s) of Complaint / Information. Mark (/) where applicable.	Complaint Made in Person				
	Telephone	:			
	Head of Department	:			
	Email & Fax	:			
	LKAN (Laporan Ketua Audit Negara)	:			
	Offical Government Letter	:			
	Laporan Suruhanjaya Pencegahan Rasuah Malaysia (LSPRM)				
	Anonymous	:			

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