# Fax complaint form

Please complete this form and send it and the fax in question to:

**Email**: fax@antispam.govt.nz
**Fax**: 04 495 9314
**Post**: Electronic Messaging Compliance, Department of Internal Affairs, PO Box 805, Wellington 6140

## Your details

|  |  |
| --- | --- |
| Full name |  |
| Address |  |
| Phone number |  |
| Email address |  |
| Fax number |  |

## Complaint details

|  |  |
| --- | --- |
| Date/time fax was received |  |
| Sender’s fax number |  |
| Sender’s name (company/individual) |  |

## Reason for submitting complaint

Please tick the relevant box(es):

[ ] I did not consent/subscribe to receive this fax

[ ] I was not able to subscribe

[ ] I have previously unsubscribed from this subscription and messages continue to be sent

[ ] The fax contains sexual content and I have not consented to receiving it

|  |  |
| --- | --- |
| Other/comments |  |

Please tick Yes or No for the following statements:

|  |  |
| --- | --- |
| I AGREE for my fax number to be passed on to the company or individual I am issuing a complaint about | [ ]   **Yes** [ ]   **No** |
| I AGREE for details of my complaint (including my name and contact details) to be referred on to, and to be contacted by, other government agencies or enforcement departments within New Zealand or internationally as part of any investigation into alleged breaches of the Unsolicited Electronic Messages Act 2007 or for the purpose of any international investigation  | [ ]  **Yes** [ ]   **No** |
| I am prepared to make a written statement or swear an affidavit regarding this matter should it be required as part of any investigation into alleged breaches of the Unsolicited Electronic Messages Act 2007 | [ ]  **Yes** [ ]   **No** |