

General complaint form

The Victorian Gambling and Casino Control Commission (VGCCC) makes every effort to achieve a compliant industry, but there may be times when a gambling industry participant, licensee, their employees or a patron breach gambling or liquor laws.

In this form, we will ask for details of the incident you believe is a breach, as well as some details about you as the complainant. You can provide the information anonymously, however giving us your contact details means we will be able to keep you informed of the results of our investigations. It also means that if we need more information, we can contact you directly without delaying the complaints process.

Instructions for making a general complaint

Step 1: Gather information before you start.

Please provide as much information as possible to assist with processing the complaint. Failure to supply information may delay processing of the complaint or may result in the complaint being dismissed. Space for additional information is located on the last page of this form.

Step 2: Complete the application.

All sections of the application should be completed prior to its submission. If there is missing information and you have supplied your contact details, we may contact you to request further information.

If you need help completing this form, please visit vgccc.vic.gov.au/i-want/complaints/make-complaint

Step 3: Submit the application.

You can submit a complaint online at vgccc.vic.gov.au/i-want/complaints/make-complaint. If you submit your complaint online you can expect a response within five business days.

Alternatively, you can print this form and mail it to:

VGCCC
GPO Box 1988
Melbourne VIC 3001

Responses to complaints made by mail may be delayed.

We respect and protect the privacy of our users. Visit our privacy policy page vgccc.vic.gov.au/privacy-policy-statement for information on how we collect and use information.

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Section A – What is your complaint about?

advertising promotions
bingo
bookmaker
community contributions
credit betting

Electronic Gaming Machines
(pokies)
minors gambling
minors on gambling floor
raffles

Responsible Service of Gambling
self exclusion
venue or staff conduct
other

If your complaint is about something that is not listed above, it may not be a matter we can help you with and you may need to direct your complaint to a different authority.

Section B – Details about your complaint

Where did the incident take place?

at a gaming venue

at Crown Casino

on the internet

at a racetrack

in a public area
(such as a park or on the street)

other

at a licenced premises
(Wagering/Keno/lottery/Bingo)

on social media

What is the person, business or organisation name?

What is the address?

When did the incident occur?

Please tell us the date and time if you can. If you are unsure, please give as much information as possible.

What happened? Please provide as much detail as possible

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Section B – Details about your complaint (continued)

Did you notify anyone in charge at the site about the incident?

Yes No

What is their name and position?

When, and how, did you raise concerns?

Have you notified any other agency? e.g. Victoria Police.

Yes No

Which agency or agencies? Please provide their contact details.

Section C – Tell us about yourself

In what role are you making this complaint?

<input type="checkbox"/> a member of the public	<input type="checkbox"/> a customer of the business	<input type="checkbox"/> a member of the liquor industry (e.g. a licensee or manager)
<input type="checkbox"/> a police officer	<input type="checkbox"/> a member of the gambling industry (e.g. venue operator or gaming industry employee)	<input type="checkbox"/> other
<input type="checkbox"/> an employee of the business		

If the complaint is substantiated, are you willing to provide a written statement regarding the matter?

Yes No

Section D – Your details

Title	Given name	Surname
Street number	Street name	
Town or city	State	Postcode
Preferred contact number	Email address	

We will contact you via your email address. When you submit this form, you will receive an acknowledgement within five business days. You do not need to provide your mailing address, your phone number and your email address, but it is important to provide at least two contact methods so we can keep you informed of the results of our investigations. It also means that if we need more information, we can contact you directly without delaying the complaints process.

I declare that the information contained in this form is true and correct and I acknowledge that enforcement action may be taken by the Victorian Gambling and Casino Control Commission as a result and that I am prepared to appear in court as a witness if required. I further understand that by giving false or misleading information on this document I may be held accountable before a court of law. Heavy penalties apply.

