



An tÚdarás Rialála
Seirbhísí Dlí
Legal Services
Regulatory Authority

COMPLAINT FORM

The Legal Services Regulatory Authority (hereinafter “the LSRA”) is a statutory body which regulates the provision of legal services by legal practitioners and ensures the maintenance and improvement of standards in the provision of legal services in the State. It is also the organisation established by legislation to accept and investigate complaints which relate to the provision of services by legal practitioners.

The LSRA is independent in the performance of its functions.

The functions of the LSRA are set out in the Legal Services Regulatory Act 2015.

Important Information

IT IS IMPORTANT THAT YOU NOTE THAT A FULL COPY OF YOUR COMPLAINT WILL BE PROVIDED TO THE LEGAL PRACTITIONER (and the Law Society in cases involving a Solicitor).

All correspondence provided by a complainant in response to a submission made by a practitioner will also be provided to the practitioner for comment.

The LSRA will note redact documents so for that reason, please write or respond to us in a factual manner and do not make any statements/comments in your response which might be considered by the practitioner to be defamatory.

We recommend that you read the enclosed Information Leaflet which tells you what you need to do and what will happen when you submit a complaint to the LSRA.

Please tick the box when you have read our information leaflet:

Please use black ink if completing by hand. Please write in BLOCK CAPITALS.

I request the Legal Services Regulatory Authority to investigate my complaint. I understand that the legislation requires the LSRA to provide a copy of my complaint and any supporting documentation/submissions to the legal practitioner and other relevant parties to achieve resolution and/or investigate the complaint.

Signed:

Name (in block capitals):

Date:

We cannot investigate your complaint if you do not sign and date the form and supply contact details.

Part 1 YOUR PERSONAL DETAILS

Mr /Mrs /Ms:

First name:

Surname:

Address:

Telephone:

Mobile: (optional)

Email address:

Please let us know if you would prefer to be contacted by email or by standard post

IF YOU ARE MAKING A COMPLAINT ON BEHALF OF ANOTHER PERSON, PLEASE COMPLETE THE ATTACHED CONSENT FORM IF APPLICABLE.

Consent Form completed, signed and attached to this form

Part 2 THE LEGAL PRACTITIONER YOU ARE COMPLAINING ABOUT

Please give us the full name of the legal practitioner you are complaining about, together with their work address if you know it.

If you wish to complain about more than one legal practitioner, **you will need to complete a separate form for each Legal Practitioner.**

Name of Legal Practitioner:

Name of the Firm: (if applicable)

Firm's address: (if applicable)

Are you a client of the Legal Practitioner you are complaining about? Yes No

Have you made this complaint to the Law Society, The Honorable Society of King's Inns or the Bar Council before? Yes No

If YES, when and what was the reference number, if available

Date: Reference Number:

What would you consider to be a satisfactory outcome of your complaint?

Part 3 DETAILS OF YOUR COMPLAINT

Please provide details about the complaint you wish to make.

Please describe your complaint as fully as possible. Explain exactly what happened, where it happened and when it happened (please use dates if possible). If there is more than one legal practitioner in your complaint, please explain how each legal practitioner was involved. If you are completing this form by hand please write clearly and if possible, please use block capitals, with a black ink pen. Alternatively, you may wish to provide details of your complaint on a separate typed sheet and attach it to this form.

Please tick here if you have provided your complaint on a separate sheet:

1. When were the services provided? (*approximate dates are sufficient*)

2. Did the legal practitioner send to you any written information about the cost of the work?

Yes No

If yes, please furnish a copy attached to this complaint form.

Please tick here if you have provided a furnished copy:

3. Is the work finished?

Yes No

If yes, when?

4. If you are making a complaint about the services provided by the legal practitioner more than three years ago, when did you first become aware of the problem?

5. Have you paid the legal practitioner?

Yes No

If yes, please furnish details of the payments made.

6. Are there any legal proceedings relating to this complaint? Yes No
If yes, please furnish a copy of all pleadings.

Please tick here if you have furnished a copy of all pleadings:

Part 4 SUMMARY OF YOUR COMPLAINT

- It would be helpful if you could set out your complaint(s) in a concise manner.
- If you have more than one complaint, please list them in numbered paragraphs.
- Extra pages may be added if necessary. Please number the pages accordingly.
- Please attach copies (not originals) of any relevant documents.
- If your complaint(s) is about fees, please attach a copy of the bill, if you received one, and a copy of any receipts for payment, if you have made any payments.

PART 5 DOCUMENTS

If you have any documents (such as letters, statement of accounts, advices or any other piece of written, printed, electronic, photographic or other form that provides information or evidence or that serves as an official record) that supports your complaint, please enclose full unaltered and unedited copies of same, and list them here. If you ask us to, we will return any documents you send to us once we have copied them.

PART 6 OTHER ORGANISATIONS

If you have made a complaint about this to any other organisation, body or Authority, it would be helpful if you would complete the section below.

Have you made a complaint to any other organisation, body or authority? Yes No

If yes, to which organisation?

If you have complained to another organisation, body or authority, please give brief details of what happened to your complaint and send us copies of any correspondence between you and them

Please tick here if you have provided a copy of any correspondence:

Part 7 CHECKLIST AND DECLARATION

Please make sure that you have:

- Read, signed and dated the cover page of this complaint form.
- Read, completed and signed all aspects in Part 1 of this form.
- Identified the legal practitioner(s) whom you are complaining about in Part 2 of this form.
- Submitted all details of your complaint in Part 3 of this form.
- Furnished copies of all supporting documents relating to Part 3 of this form.
- Submitted all details relating to documents, witnesses and other organisations in Part 3 of this form.
- Furnished copies of all supporting documents relating to Part 4 of this form.
- Furnished copies of all supporting documents relating to Part 5 and Part 6 of this form.
- Consent form completed and signed if appropriate.

DECLARATION

I declare that all information I have given, or caused to be given, in this form, is, to the best of my knowledge, complete and accurate. If you are completing this form electronically, please type your name in the signature field below.

Signed:

Name (in block capitals):

Date:

| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| When you have completed this form, please email it (and scan any supporting documentation) to us at: complaints@lsra.ie | Or, if you do not have access to email, please post it to us with any supporting documentation to Complaints Department Legal Services Regulatory Authority P.O. Box 12906 Dublin 7. | If you require more information about how we deal with complaints, please visit our website at: www.lsra.ie |
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Consent Form

If you are making the complaint on behalf of someone else that person must sign the form below, unless, because of age or a mental or physical condition, they are incapable of giving consent:

If the complainant is incapable of giving consent, please tick this box

I consent to _____ making a complaint on my behalf to the Legal Services Regulatory Authority and I authorise the LSRA to correspond with him/her for the duration of this complaint unless I instruct the LSRA otherwise.

Name in Block Capitals:

Date:

Data Protection Notice

The Legal Services Regulatory Authority has updated its 'Data Protection Notice' to make it easier to understand what information we collect, why we collect it, how we use it and your rights. Our Data Protection Notice is available online at <http://www.lsr.ie/en/lsra/pages/governance>

General Data Protection Regulation (EU) 2016/679 - GDPR

The Legal Services Regulatory Authority has always valued, and continues to value your privacy and takes its commitment to keeping your data secure very seriously. To that end, we have updated our privacy statement in line with the General Data Protection Regulation (GDPR), which takes effect from 25 May 2018 pursuant to the provision of the **General Data Protection Regulation (EU) 2016/679**

In addition, we have also updated the terms and conditions of use of the website and our cookies policy.

Updated privacy statements for different departments and processes of the Legal Services Regulatory Authority can be accessed in the relevant area of the website.

View updated governance policies on our website

- View our updated Strategy Statement
- View our updated Corporate Governance Assurance Agreement
- View our updated Protected Disclosures Policy and Procedures
- View our updated Privacy Notice
- View our updated Subject Access Request form
- View our Privacy and Cookies Policy

Contact us

If you have any queries, please contact the Authorities Data Protection Officer:

Data Protection Officer

Legal Services Regulatory Authority

P.O. Box 12906

Dublin 7

Email: dpo@lsra.ie