MINISTRY OF LANDS, PUBLIC WORKS, HOUSING AND URBAN DEVELOPMENT

State Department for Housing and Urban Development

Second Kenya Informal Settlements Improvement Project (KISIP2)

GRIEVANCE REDRESS FORM

Settlement: **Project Phone Number: ……**

Complain No.

Preferred Language Kiswahili English

1. Complainant's personal details

   Name: ……

   ID No. (Attach a copy of the ID): ……

   Telephone Number:…

   Address (postal/email) ……

   Location: ……

2. Nature of your complaint.

   ……

   ……

   ……

3. Complaint Raised/Description of Grievance by the aggrieved

   ……

   ……

   ……

   ……

4. What is your plea/request?

   ……

   ……

……

……

Signature: …… Date: ……

5. Name of Witness if any

……

Signature: …… Date: ……

Witness Statement

……

……

……

……

6. Name of the recipient

……

Signature: …… Date: ……

7. Action Taken:

……

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……

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……

……

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ACKNOWLEDGEMENT RECEIPT

Settlement: **Project Phone Number: ……**

Complaint no.: ……. Date of issuing complaint: ……/……/202---

Place of issuing complaint:

Village/Town/City/Area: ……... Sub-County:

…….

Details of the Complainant:

Name: ……. ……. Age: …… Address:

……

Gender: …… Phone no.: ……...

Email address: …….

Supporting documents submitted:

i.…….

ii.……

Summary of complaint:

……

……

……

……

…….

Name of Officer receiving Complaint: _____

Signature of Officer receiving Complaint: _____

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MEETING RECORD STRUCTURE (GRIEVANCE REDRESS COMMITTEE & OTHER MEETINGS)

Settlement: **Project Phone Number: ……**

Date of Meeting: ……..… Complaint no.: ……..……..
Venue of Meeting: …….

Summary of Grievance:

……
……..……
……
……
……

List of participants:

Complainant Side	Grievance Redress Committee Members
1) 2) 3) 4)	1) 2) 3) 4)

Decisions Made/Recommendations by the Grievance Redress Committee:

1)

2) Status of Grievance (tick where applicable):

Solved		Unsolved	

Chair person's name: _____

Chair person's signature: _____ Date ……/……/2022



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GRIEVANCE RESOLUTION FORM

Settlement: **Project Phone Number: ……**

Review/Resolution

Date of Conciliation Session: _____

Was Filer Present? : Yes No

Was field verification of complaint conducted? Yes No

Findings of field investigation:

_____

_____

_____

Summary of Conciliation Session Discussion:

_____

_____

Issues _____

Was agreement reached on the issues?
Yes No

If agreement was reached, detail the agreement below:

If agreement was not reached, specify the points of disagreement below:

_____

Signed (Chairman GRC): _____ Signed (Filer): _____

Signed: _____
Independent Observer

Date: _____

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DISCLOSURE FORM

Settlement: **Project Phone Number: ……**

Village/Town/City/Area …… Location/Sub-County ……

Result of Grievance Redress:

1. Complaint no. 2. Name of Complainant: ……
2. Date of Complaint: ……/……/2022
3. Summary of the Complaint:
   ……
   ……
   ……

……
……

4. Summary of Resolution:

……
……
……
……
……

5. Level of Redress (please tick where applicable)

Multistakeholder Level		Locational level	

6. Date of grievance redress (dd/mm/yyyy): _____

Name and Signature of the Complainant, indicating acceptance of the solution

Name: _____

Signature: _____ Date ……/……/202

Name of Grievance Handling Officer: _____

Signature of Grievance Handling Officer: _____ Date (dd/mm/yyyy):

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GRIEVANCE LOG FORM

NO.	Date Received	Case Number	Complainant Name and Contact	Nature of Complaint	Complainant's Request	Resolution/Action and Date Resolved	Date Feedback Given	Remarks/Action/ Status
1								
2								
3								
4								
5								
6								
7								
8								

9								
10								