



**MINISTRY OF INFRASTRUCTURE  
AND SUSTAINABLE ENERGY  
SOUTH TARAWA WATER SUPPLY PROJECT**



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**STWSP Grievance Redress Registering and Monitoring Form (Booma ibukin Bubuti/Kanganga)**

**Grievance Number:**

(Nambwan te Bubuti/Kanganga)

**Date:**

(Te Bong)

**Time:**

(Te Tai)

**PART A: Complainant Information – Rongorongon te Tia Bubuti/Tang**

- 1 Full Name or Anonymous (Aram/Aki kan kaota Aram) .....
- 2 Address (Am Tabo) .....
- 3 ID Number .....
- 4 Gender  Male (Mwane)  Female (Aine)
- 5 Age (Am Ririki) .....
- 6 Telephone (Tareboon) .....
- 7 Email (E-meeri) .....
- 8 Type of Complainant (Karinan ibukin Te Tia Bubuti/Tang)  
 Affected Person (Te tia Rotaki man ana mwakuri te Karikirake)  Government Organization (Tautaeaka)  
 Intermediary (Te Tia Tei ibukin Te Tia Rotaki)  Others (Specify) (Tabeua Riki)  
 Civil Organization (Rabwata aika kinaki n aron Community) .....

**PART B: Complaint Details – Rongorongon te Bubuti/ te Kanganga**

- 9 Mode of Receiving grievance/problem (Aron nikirakin te bubuti/te kanganga)  
 Letter (Te Reta)  In Person (Ko bon maroro ma taan mwakuri)  
 Telephone (Tareboon)  Suggestion Box (Bwaaki n Kaoti Iango)  
 Email (E-meeri)  Others .....
- 10 Location of problem/grievance (Te Tabo are riki iai te Kanganga)  
Village (Kaawa): ..... GPS/WP3 coordinates (if any): .....  
Community: ..... Others: .....  
Land plot Name/Number (Aran/Nambwan te Aba): .....
- 11 Category of Grievance/Problem (Karinan ibukin te Bubuti/te Kanganga)  
 Environment and Social Issues (Rotakin te Otabwanin ao te Botannaomata)  
 Resettlement, Compensations and Land Ownership (Kamwaing, Kabomwi ao Taan Ababa)  
 Employment (Kammwakuri)  
 Misuse of Project Funds & Corruption (Kabongana buaka mwanen te Kairikirake ao Waki ni Kamangao)  
 Violation of Policies (Uruan Tuua/Kainibaire)  
 Suggestions / Others (Iango riki Tabeua)

**12 Brief Description of Problem. Provide factors and agencies causing the problem** (*Kabwarabwara te Kanganga, Baikara bwai ke rabwata aika a karika te kanganga*)

(Please include information that you consider relevant. If more space is required, continue at the back of this page)

Do you request that all identity be kept confidential? *Ko tangiria bwa a na aki kaotaki araia nake ko taekinia?*  
 **Yes**                       **No**

**13 Previous Effort to Resolve the Complaint**

Have you raised the same complaint with STWSP GRM before? *Ko a tia n uotarake tangim aei mai mwaina?*  
 **Yes**                       **No**

If Yes, please provide the following (*Ngkana ko a tia ao kaoti rongorongona n ae oti i nano*)  
Assigned Number (*Nambwan te Bubuti/Kanganga*): .....  
Name of Officer (*Aran te Aobitia ae butimwaiko*): .....  
Position (*Ana mwakuri*) .....  
Office (*Te tabo ni mwakuri ae ko nikira iai am Bubuti*): .....  
Date (*Te Bong*): .....

Please describe any response received from any actions taken by the GRM committee level. Please explain why the response or actions taken are not satisfactory. (*Tera mwakuri ibukin kaekan am tang are ko moan tabekia ao bukin tera ko aki kukurei iai?*).

(Please include information that you consider relevant. If more space is required, continue at the back of this page)

**14 Proposed resolution by the Complainant** (*Tera ae ko tangiria bwa kaekaan am Bubuti/Kanganga?*)

(Please include information that you consider relevant. If more space is required, continue at the back of this page)

**15 Declarations**

**Name of Person Completing this Form** (*Aran Te tia Kanoa te Booma*): .....

**Signature** (*Am Tiaina*) .....                      **Date:** .....

**PART C: \*\*\*FOR OFFICE USE ONLY\*\*\***

Grievance No:

**16 Actions taken by receiving office/ministry**

<b>Action 1</b>	<b>Action 2</b>	<b>Action 3</b>	<b>Action 4</b>
<b>Short description</b>	<b>Short description</b>	<b>Short description</b>	<b>Short description</b>
<b>Name of Action Officer</b>	<b>Name of Action Officer</b>	<b>Name of Action Officer</b>	<b>Name of Action Officer</b>
<b>Office</b>	<b>Office</b>	<b>Office</b>	<b>Office</b>
<b>Date</b>	<b>Date</b>	<b>Date</b>	<b>Date</b>

**17 Final Resolution**

<b>18 Name of Officer Entering Information into GRM Database</b>	<b>Signature</b>	<b>Date</b>
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