

## Workplace Relations Complaint Form CA-00085045

Receipt Date: 09/06/2026 12:00:33 AM

### Complainant Details

Title	
Firstname	Niocláisín Cólín
Surname	de Ghlostéir
If Complainant is a Company or Rep. Body	
House Name or Number	A/C Dr <sup>a</sup> Marília Bacanhim Catarino,
Street / Road:	R Pe António Nogueira Gonçalves, Lt 4 - 3º Dto
Town:	Coimbra
County:	
Country:	Portugal
Postcode:	3000-090
Contact Number:	
E-mail:	Gloucester@Insomnia247.NL
Nationality:	Irish
Position Held:	
Employer (PAYE) Number :	
Is the employer/respondent aware you are making this complaint?	

### Good/Service/Facilities Provider Details

Name/Company:	ainm anaithnid do fhear
Trading as (if applicable):	Holohan Lane LLP
Building Name or Number	Waterview House
Street / Road:	16 Bóthar Thobar Rí an Domhnaigh
Town:	Corcaigh
County	Cork
Country	
Postcode:	T23 Y952
Title:	
Firstname:	ainm
Surname:	anaithnid do fhear
Position Held:	
Contact Number:	
Email:	reception@HolohanLaw.Ie
Is the head office address different from above?:	No
Main business activity/sector:	Professional, Scientific & Technical
Is this a Limited Company?:	Yes
Is this company in Receivership / Liquidation	Neither
County	Cork

### Representative Details

Will you have representation?	No
-------------------------------	----

### Special Facilities

Should your complaint fall to be considered by an Adjudication Officer, will you require any special facilities when attending a hearing?	No
Special Facilities Details	

### Specific Complaint CA-00085045-001

My complaint falls under (Please select from the drop down list below): *	Discrimination/Equality/Equal Status
---	--------------------------------------

Discrimination / Equality / Equal Status Type	I have been discriminated against by a person, organisation/company who provides goods, services or facilities
I say that I have been discriminated against by reason of my Gender	Not Selected
I say that I have been discriminated against by reason of my Civil Status	Not Selected
I say that I have been discriminated against by reason of my Family Status	Not Selected
I say that I have been discriminated against by reason of my Sexual Orientation	Not Selected
I say that I have been discriminated against by reason of my Religion	Selected
I say that I have been discriminated against by reason of my Race	Selected
I say that I have been discriminated against by reason of my Age	Not Selected
I say that I have been discriminated against by reason of my Disability	Selected
I say that I have been discriminated against by reason of my Housing Assistance	Not Selected
I say that I have been discriminated against by reason of my Membership of the Travelling Community	Not Selected
I say the respondent treated me unlawfully by discriminating against me in Provision of goods/services	Selected
I say the respondent treated me unlawfully by discriminating against me in Accommodation	Selected
I say the respondent treated me unlawfully by discriminating against me in Education	Selected
I say the respondent treated me unlawfully by discriminating against me in Other	Selected
I say the respondent treated me unlawfully by discriminating against me in Harrassing me	Selected
I say the respondent treated me unlawfully by discriminating against me in the Failing to give me 'reasonable accommodation' for a disability	Selected
I say the respondent treated me unlawfully by discriminating against me in victimising me	Selected
I say the respondent treated me unlawfully by Direct Discrimination	Selected
I say the respondent treated me unlawfully by Indirect Discrimination	Selected
Is this Ongoing Discrimination	Selected
What is the most recent date of discrimination *	08/06/2026
What is the date of the first incident of discrimination *	23/04/2026
What date did you notify the person/service provider using the ES1 Form?	01/05/2026
Have you received a reply from the person/service provider on the ES2 Form?	Not Selected
Selected Redress Option	Complaint seeking adjudication by the Workplace Relations Commission under Section 21 Equal Status Act, 2000
Redress Type	Adjudicator

## Complaint Specific Details or Statement

Cf. 2026-05-01a\_Holohan\_Lane\_foirm-es-1-na-hachtanna-um-stdas-comhionann-2000-2015-fgra agus 2026-05-01e\_ceisteanna agus 2026-04-30b\_data-subject-access\_request\_to\_Holohan\_Lane\_LLP agus 2026-05-01f\_Letter\_to\_Liam\_Quaide agus 2026-05-18j\_cruthu\_seachadta agus 2026-05-

18k\_Solicitor\_John\_Lane\_signed\_for\_RL066489346IE agus 2026-05-01h\_Certificates\_of\_Postings\_img20260501\_18271399 agus 2026-05-01g\_30Euro\_img20260501\_18235955 agus HTTP://Gloucester.Insomnia247.NL/gardai/Where\_are\_you\_from/2026-04-20z\_talk\_with\_psychologist\_ShareX\_7mfqzHfwmt.mp4 agus HTTP://Gloucester.Insomnia247.NL/gardai/Where\_are\_you\_from/2026-05-16h\_talk\_with\_psychologist.mp4 agus HTTP://Gloucester.Insomnia247.NL/gardai/Where\_are\_you\_from/2026-05-16i\_talks\_with\_psychologist.m4a agus 2014-01-31\_power\_of\_attorneys\_for\_2\_administrative-court\_cases (ag baint le mórán cuairteanna gan choinní ar dhlíodóiríbh) agus 2026-03-13f\_gearan\_Information\_No\_15-3.pdf agus 2026-03-13i\_Summons\_No\_15-1.pdf agus Autist\_plaintiff\_continues\_to\_experience\_frustrations\_and\_trauma\_from\_assaults\_after\_245\_days\_discussed\_by\_psychologist\_23 agus 2026-04-23g\_signed\_form\_img20260425\_15291142 agus 2008-xy-za\_Attwood\_Complete-Asperger-Index\_Page390\_social\_anxiety\_social\_competence\_lack\_of\_stress\_benefits\_to\_society\_depression\_eccentricity\_anxiety\_srl. agus 2026-04-22z\_W6\_tortured\_you\_You\_also\_advised\_me\_that\_the\_District\_Judge\_had\_refused\_to\_listen\_img20260425\_15243732 agus 2026-04-22z\_W7\_foirm\_img20260425\_15275720 agus 2026-04-22z\_W9\_footer\_barely\_legible\_even\_scanned\_at\_600DPI\_img20260425\_15381862 agus 2026-04-22z\_X2\_Terms\_of\_Business\_2024\_img20260425\_16090033 agus 2026-04-22z\_X3\_Holohan\_Lane\_LLP\_demands\_lots\_of\_money\_instead\_of\_justice\_img20260425\_16210996 agus 2026-04-22z\_X4\_Identify\_yourself\_to\_the\_personnel\_img20260425\_16240288 agus 2026-04-22z\_X5\_requirements\_passport\_and\_utility\_bill\_img20260425\_16261554 agus 2026-04-22z\_X7\_Legal-Services-Regulation\_Act\_2015\_150-153\_img20260425\_16404325 agus 2026-04-22z\_X8\_YOUR\_SOLICITOR\_img20260425\_16434552 agus 2026-04-22z\_X9\_your\_solicitor\_img20260425\_16481728 agus 2026-04-22z\_Y2\_Solicitor\_and\_own\_Client\_Costs\_distinguished\_from\_Party\_Costs\_img20260426\_09234789 agus 2026-04-22z\_Y3\_your\_solicitor\_img20260426\_09321033 agus 2026-04-22z\_Y4\_Christianity\_Pettyfoggers\_means\_lousy\_lawyers\_img20260426\_10135610 agus 2026-04-22z\_Y5\_Defendant\_Thomson\_Reuters\_publishes\_a\_book\_by\_Bill\_Holohan\_img20260426\_10214774 agus 2026-04-22z\_Y6\_Senior\_Counsel\_Solicitor\_img20260426\_10251015 agus 2026-04-22z\_Y7\_Irish\_Lawyer\_of\_the\_Year\_awarded\_in\_2021\_img20260426\_10272073 agus 2026-04-22z\_Y8\_hypocrisy\_by\_Holohan\_Lane\_LLP\_img20260426\_10283663

## Work Place Relations Commission Mediation Services

Please indicate if you would be willing to avail of mediation services to facilitate the resolution of your complaint/dispute should the Workplace Relations Commission be in a position to offer these services in this case.	No
--	----

## Submission Page

By providing an email address you are consenting to the Workplace Relations Commission communicating with you by electronic means (eMail) including the serving or giving notice(s)/document(s)	Yes
I declare that, to the best of my knowledge, the information provided in relation to the complaint(s) above is accurate.	Selected
Version Date	09/06/2026