**CUSTOMER COMPLAINT FORM**

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| **CUSTOMER INFORMATION** **(Reporting Entity)** |
| **Reporting Entity:**Click or tap here to enter text. | **Reporting Entity’s Phone:**Click or tap here to enter text. |
| **Reporting Entity’s Address:**Click or tap here to enter text. |
| **COMPLAINT INFORMATION** |
| **Date of Complaint:**Click or tap to enter a date. |
| **Complaint Details:**Click or tap here to enter text. |
| ***Submitted By*** |
| **Name of person completing this form** | Click or tap here to enter text. |
| **Position of person completing this form** | Click or tap here to enter text.  |
| **Signature** | ………………………………………………………. |
| **Date of Submission** | Click or tap to enter a date. |

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| ***FOR OFFICIAL USE ONLY*** |
| **Reference Number** | Click or tap here to enter text.  |
| **Date Received** | Click or tap to enter a date. |
| **Received By** | Click or tap here to enter text. |
| **Signature** | ………………………………………………………. |
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