**CUSTOMER COMPLAINT FORM**

|  |  |  |
| --- | --- | --- |
| **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. | |

|  |  |
| --- | --- |
| ***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** | ………………………………………………………. |
|  | |