

Customer Complaint Form **BEACHWHEELS** AUSTRALIA.COM

1. Customer Details

| | | | |
|-------------------------------|---------------------------|-------------------------|----------------------|
| Title (Mr, Mrs, etc) | Family name (Surname) | Given names | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| Address | | Suburb | Postcode |
| <input type="text"/> | | <input type="text"/> | <input type="text"/> |
| Home telephone number | Business telephone number | Mobile telephone number | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| Email Address (if applicable) | | | |
| <input type="text"/> | | | |

2. Details of other person or supplier involved in this complaint

| | | | |
|-------------------------------|---------------------------|-------------------------|----------------------|
| Name | | | |
| <input type="text"/> | | | |
| Address | | Suburb | Postcode |
| <input type="text"/> | | <input type="text"/> | <input type="text"/> |
| Home telephone number | Business telephone number | Mobile telephone number | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| Email Address (if applicable) | | | |
| <input type="text"/> | | | |

3. Details of goods or services supplied to the customer

| |
|---|
| Date of purchase or service |
| <input type="text" value="/"/> <input type="text" value="/"/> <input type="text" value=""/> |
| Description of the goods or service including make, model, type of service, serial number, etc. |
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |

4. Details of what the customer complaint is

| |
|----------------------|
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |

Office use only

Complaint received by

Signature

Date received