

Client comments recording form

Type of communications			
Complaint <input type="checkbox"/>		Objection <input type="checkbox"/>	
Suggestion <input type="checkbox"/>			
Contact details			
Name			
Company			
Phone number		e-mail	
Description			
<p>You may use the space below to report any suggestions, complaints or objections. Please, be reminded to include as many details as possible (e.g., your application’s reference number, dates, etc.)</p> <div></div>			

Have you ever submitted a communications form for a similar incident in the past?

Yes ☐

No ☐