

**BDC AND CLCL**  
**MARKET PLANNING AND DEVELOPMENT UNIT**  
**CUSTOMER COMPLAINT/INQUIRY FORM**

**SECTION A**

DATE: \_\_\_\_\_ TIME \_\_\_\_\_ LOGGED BY: \_\_\_\_\_

**CUSTOMER INFORMATION**

CUSTOMER NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ FAX: \_\_\_\_\_

CUSTOMER ADDRESS: \_\_\_\_\_

\_\_\_\_\_

**COMPLAINT / INQUIRY INFORMATION**

DESCRIPTION OF COMPLAINT/INQUIRY: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION B**

**DETAILS OF INVESTIGATION**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION C**

**ACTION TAKEN TO RESOLVE COMPLAINT**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

RESPONSIBILITY FOR ACTION: \_\_\_\_\_ COMPLETION DATE: \_\_\_\_\_

**FOLLOW UP ACTION**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION A – To be completed by the recipient of the inquiry/complaint**  
**SECTION B – To be completed by the authorized person conducting the investigation**  
**SECTION C – To be completed by the authorized person taking action to resolve the complaint**