## WHITEMAN PARK

## CUSTOMER FEEDBACK FORM

NATURE OF CONTACT										
☐ Compliment	Suggestion	☐ Complaint	☐ Request for Serv	rice Feedback						
		CONTACT DETA	AILS							
Please enter your co	ntact details belov	_								
Name:										
Telephone number:	Mobile:									
Address:										
Suburb:		Postcode:								
Email:										
		SUMMARY OF IS	SUE							
Please briefly explain	n the issue below a	nd attached copie:	s of relevant document	ation if applicable.						
Details:										
Name of area/staff r	member this pertai	ns to (if known):								
Date of incident (if a	pplicable):	Date	of report:							
Have you previously	contacted us abou	t this issue? 🗌 Ye	es No							
If yes, please give de	tails:									
What outcome are y	ou seeking?									
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## CUSTOMER FEEDBACK FORM

		ADISABILITY, JIRE ALTERNA									
Telephone Typewrit		□ No		reter Servi	_		□ N	0			
IF YOU ARE W	RITING ON SO	OMFONE ELS	F'S REHALE	DI FASE FII	LINI	HEIR	DETAILS	S BFI (	ow .		
Name:	in in its on so										
Telephone number:				Mobile:							
Address:											
Suburb:			Postcode:								
Email:											
Your relationship to	complainant	(eg. brother,	mother, frier	nd):							
Has the complainan (please tick) Yes	· _ ·	permission fo	r you to lodg	e this feed	back i	ssue o	n their	behalf	f?		
Signed:				Date:	:						
Please complete and or you can post or er  Post: Business and Whiteman Pa	<b>nail it to:</b> Marketing Te		the Visitor II	nformatio	n Cent	tre in t	he Villa	age,			
233a Drumpe WHITEMAN V	ellier Drive										
Email: enquiries@w	hitemanpark	com.au (Attr	n: Business &	Marketing	Team	Leade	r)				
		OF	FICE USE ON	LY							
Reporting Officer:											
Nature of contact:	Telephon	e 🗌 Email	☐ In-pers	son							
Date reported:			Time r	eported:							
Details of action:											
Job allocated to:			Date:			1	1 1				
Customer Feedback	File Reference	ce Number:									