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CUSTOMER CONCERN FORM

Name: _____

Address: _____

Phone number: _____ Email: _____

Date: _____

Please outline your concern below, providing as much detail as possible.

Area of Concern

Residential Commercial Recreation Flight Training Airport Other

Concern:

SOUTHPORT:

Received by: _____

Date Received: _____

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Immediate Action Taken:

Re-Directed to:

Date:

Initials:

Results of Action Taken:

Recommended Further Corrective/Preventative Action:

Supervisor / Manager Comments

1. Scanned & Filed at O:\Ops Shared\Activity Reports\Rec Centre OR Property Management OR Facilities \ Customer Concern Forms o
2. Copy provided to Director, Operations o