**CUSTOMER COMPLAINT FORM**

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| **Name of Facility** |  |
| **Address** |  |
| **Manager/Supervisor of customer** |  |
| **Name of Complainant** |  |
| **Designation of Complainant** |  |
| **Reference No. (by NTLDL)** |  |
| **Contact Number** |  |
| **Email Address** |  |
| **Date of Complaint** |  |
| **Describe in detail and accurately the nature of your complaint.** | |
|  | |
| **Give the name of the person you first reported the complaint to.** | |
|  | |
| **Describe what actions must be taken in order to deal effectively with your complaint.** | |
|  | |
| **Describe what measures can be taken to avoid a repeat of your complaint.** | |
|  | |

I request Nagase (Thailand) Co.,Ltd. to investigate on my complaint.

|  |  |
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| **Signature of the Complainant** |  |
| **Date** |  |
| **Complaint Recorded By** |  |
| **Date** |  |
| **Communicated to Customer By** |  |
| **Date** |  |

**IF YOU ARE MAKING A COMPLAINT ON BEHALF OF ANOTHER PERSON, THE PERSON MUST SIGN HERE:**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ confirm that this complaint is made on my behalf and with my consent.

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