CUSTOMER COMPLAINT FORM

CUSTOMER INFORMATION	
Name:	Phone number:
Address:	
Company name / address:	
Contact name:	Contact position:
Customer number:	Order number:
Product number / description:	
COMPLAINT INFORMATION	
Complaint date:	Complaint taken by:
Complaint detail:	
First response corrective action:	
Suspected cause of the problem:	
Corrective action follow-up:	
Steps to be considered to avoid a repeat of the problem:	
Date:	
Signed:	