Customer Complaints Form

Customer Name					Contact Name	
Customer Address						
					Contact Position	
Contact Number						
Boat Hired						
Date of Hire						
Date of Complaint						
Who Was Affected?						
Complaint Details						
Suspected Cause						
Immediate Corrective Action						
Risk Review Required?						
Ongoing Action Required To Avoid Repeat of Action						

Signed:

Name of Person Completing Form: