

Retail Customer Complaint and Resolution Form

Customer Information

Full Name

Contact Number

Email Address

Address

Complaint Details

Date of Complaint

Date of Transaction

Product/Service Concerned

Description of Complaint

Resolution Sought

Office Use Only

Received By

Date Received

Reference/Case No.

Actions Taken/Remarks

Resolution

Resolution Details

Resolution Date

Resolved By

Customer Signature: _____

Date: _____

Authorized Signature: _____

Date: _____