

CUSTOMER FEEDBACK FORM

The Town of Hanover values all of our customers and strives to meet everyone’s needs. Your feedback is important to us. By answering the following questions you will help our organization to better assist you. We use your feedback to make sure that we meet reasonable expectations and can provide our services to all our users, and make improvements where necessary.

NOTE: The form is also available online at hanover.ca/accessibility and is available in alternative formats in the Clerk’s Department.

Date _____

What department, program or facility did you attend? _____

Did we respond to your customer service needs? YES NO

Was our customer service provided in an accessible manner? YES NO

Please explain _____

Did you have any problem accessing our services? YES SOMEWHAT NO

Please explain _____

Contact Information (OPTIONAL)

Name _____

Address _____

Phone Number (day) _____ (evening) _____

Email _____

Preferred Method of Contact: Mail Phone Email Other _____