

Accessible Customer Service Feedback Form

The Township of Brock is committed to providing high quality customer service. We value all of our customers and strive to meet everyone's needs. We use your feedback to make sure that we can meet reasonable expectations and can provide our services to all users and make improvements, where necessary.

| Please complete this section: | | | | |
|---|-------|------|------------|--|
| Which Township of Brock facility did you visit? | | | | |
| What part of the facility did you visit? | | | | |
| | | | | |
| Did we respond to your customer service needs? ☐ Yes | □ No | | | |
| If no, please explain why: | | | | |
| Was our customer service provided in an accessible manner? | □ Yes | □ No | ☐ Somewhat | |
| Please explain: | | | | |
| Did you have any issues accessing our goods or services? | □ Yes | | □ No | |
| Please explain: | | | | |
| Please provide any other comments or suggestions you may ha | | | | |
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| Would you like to be contacted by the Township? | □ Yes | □ No | | | |
|--|--------------------|---------|--|--|--|
| Note: If yes, upon receipt, the Township shall investigate the matter and provide a written response | | | | | |
| within 30 days. | | | | | |
| | | | | | |
| Please provide us with your contact information: | | | | | |
| Name: | | | | | |
| Mailing Address: | | | | | |
| Home Phone Number: | Cell Phone Number: | | | | |
| Email Address: | Email Address: | | | | |
| Please indicate your preferred method of contact: | □ Phone □ Mail | □ Email | | | |
| | | | | | |
| Thank you for your feedback! | | | | | |
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| Please return your completed form: | | | | | |
| Attention: Clerk's Department | | | | | |
| In-Person/Mail: Township of Brock, 1 Cameron Street East, Box 10, Cannington, Ontario, L0E 1E0 | | | | | |
| Telephone: 705-432-2355 | | | | | |
| Fax: 705-432-3487 | | | | | |
| Email: <u>brock@townshipofbrock.ca</u> | | | | | |
| For Office Use Only | | | | | |
| | | | | | |
| Date feedback form was received: Received by: | | | | | |
| Follow Up required: ☐ Yes ☐ No Date follow up required by: | | | | | |
| Follow up completed by: Date follow up completed: | | | | | |
| Additional Information/Notes: | | | | | |
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NOTE: Personal Information on this form is being collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act R.S.O. c.F.31, s. 39 (2). Questions about the collection of personal information may be directed to the Township of Brock, 1 Cameron St. E., Box 10, Cannington, Ontario, L0E 1E0.