

WesTech Component Co., Ltd

Customer Complaint Form



1. Customer Details

Title (Mr., Mrs., etc)

Family Name (Surname)

Given Name

Company name

Company Address (include Post code)

Business telephone Number

Mobile number

Position

Email Address

2. Details of the goods

Date of purchase

P.O Number

____/____/____

Description of the goods including part number, brand, package, type, purchase method, and any other.

3. Details of the complaint

4. What method is use in testing the part before application? (if a device is use for testing the result should be attached to this form)

I have read and understand all questions on this form. I shall be fully responsible for my answers which are true and correct. Any false, misleading or incomplete statement may result to refusal of this complaint.

Signature over printed name:

Date: ____/____/____

Action taken

Supplier signature:

Date: ____/____/____

Customer signature:
(For customer acceptance)

Date: ____/____/____