



## CUSTOMER FEEDBACK FORM



We value our customers and strive to meet everyone's needs. This completed form will assist us in determining if there are areas where we need to improve in order to serve you better.

Please tell us the date and time of your visit:

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Do you have a disability?  Yes  No If yes, please identify your disability (optional):

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Are you submitting this feedback form on behalf of a person with a disability?

Yes  No If yes, please identify their disability (optional): \_\_\_\_\_

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What Facility/Department/Service does the feedback pertain to?

North Simcoe Sports and Recreation Centre

Library

Fire Hall

Transit

Municipal Office

Finance Tax Counter

Planning/Engineering Counter

Transit

Communications (website, publications, signage, meetings)

Parks and Open Space (trails, parks, playground equipment)

Customer Service (cashier, front-line staff)

Recreational Programs (internal/external)

Other \_\_\_\_\_

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Did we respond to your customer service needs today?  YES  NO

Was our customer service provided to you in an accessible manner?

YES  SOMEWHAT  NO (please explain below)

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Did you have any problems accessing our goods and services?

YES (please explain below)       SOMEWHAT (please explain below)       NO

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Please add any other comments you may have:

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Suggestions for Improvement/Resolution:

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If you wish to receive a response to your feedback, please provide your contact information below.

**Contact Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Thank you for taking the time to complete this form, your comments are appreciated.

Date Received: _____ Date Action Taken: _____
Action Taken: _____
Copy of Customer Feedback Form provided to Administration – Date: _____

**Personal information contained on this form is collected pursuant to the *Accessibility for Ontarians with Disabilities Act, 2005*, and will be used to assist the Town in ensuring that the delivery of its goods and services to those with disabilities is provided in an effective and timely manner. Questions about this collection should be directed to the Accessibility Co-ordinator, Karen Desroches, Town of Midland, 575 Dominion Avenue, Midland, ON L4R 1R2 Ext. 2208 email [clerks@midland.ca](mailto:clerks@midland.ca).**