



TOWNSHIP OF EAST LUTHER GRAND VALLEY

Accessible Customer Service Feedback Form

(Form also available in large print)

Name _____

Address _____

Telephone _____ Email _____

Date _____

Feedback or Suggestions:

Complete form and return it to Department Manager. Forward a copy of the form to the County Clerk.

For Office Use only - Outcome or Action Taken



TOWNSHIP OF EAST LUTHER GRAND VALLEY

Accessible Customer Service Feedback Form

(Large print version)

Name _____

Address _____

Telephone _____ Email _____

Date _____

Feedback or Suggestions:

Complete form and return it to Department Head. Forward a copy of the form to the Clerk.

Information collected in accordance with the Customer Service Accessibility Policy.