

AODA – Accessibility Standards for Customer Service Record of Customer Feedback Form

Thank you for visiting Dart Aerospace. We value all of our customers and strive to meet everyone's needs.

Please tell us the date and location of your visit:

Date:

Location:

1. Were you satisfied with the customer service we provided you? (Please indicate your response(s) by circling or highlighting the chosen field)

Yes

No

Somewhat

Comments

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

Yes

No

Somewhat

Comments

3. Did you experience any problems accessing our goods and services?

Yes

No

Somewhat

Comments

Contact Information (optional)

Name: _____ Phone Number: _____

Email: _____

Thank you,



Management

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