

Customer Service Charter – Feedback Form

YOUR DETAILS

Name: _____

Address: _____

Postal Address: _____
(if different to residential address)

Telephone: _____ Mobile: _____

Email: _____

Are you a: Ratepayer Resident Visitor

Nature of Feedback: Compliment Complaint Suggestion

Details of feedback: _____

Signature: _____ Date: _____

Please return this form to the Shire of Toodyay Administration Office:

Email: records@toodyay.wa.gov.au

Mail: Shire of Toodyay
 PO Box 96
 TOODYAY WA 6566

In person: Administration Office (Old Courthouse Building)
 15 Fiennes Street
 TOODYAY WA 6566