



## Customer Feedback Form

### 1. Customer details (leave blank if anonymous)

Boat name:	<input type="text"/>	Name:	<input type="text"/>
Email:	<input type="text"/>	Tel:	<input type="text"/>

### 2. Nature of the feedback

### 3. Details of the feedback

Date submitted (dd/mm/yyyy):

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### Office use only

Received by:  Date received:

Action taken or required:

Date action completed:  Signature:

**Bembridge Harbour Authority**

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