



Customer Feedback Form

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

Please tell us the date and time of your visit: _____

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)

Did you have any problems accessing our goods and services?

Yes (Please Explain) Somewhat (Please Explain) NO

Please add any other comments you may have:

Contact information (optional)*:

Thank you.
Management

Please submit this form to:

The Township of Selwyn
P.O. Box 270
Bridgenorth, ON K0L 1H0
(705) 292-9507
Fax (705) 292-8964
www.selwyntownship.ca