SURIA JAYA MANAGEMENT CUSTOMER CARE FORM- COMPLAINT

DETAILS			
Name of Applicant (Owner)		Unit No.	
IC No.		Date	
Submitted By.	Owner/Tenant/Others:	Contact	
Address		Email	
Attended By			
Area / Location	Complaint Description		
Confirmed submitted By:-			
Name: Date:			
I/We(Name & I/C No.) hereby confirm and undertake acknowledge to have written the above true and correct. I/We assure that it's an offence to submit / cause an innocent party(ies) suffered due to my/out complaint above and shall be held liable/subject to suit thereafter.			
Witnessed By:- Name:			
Date:			
I/We(Name & I/C No.) hereby confirm and undertake acknowledge to have written the above true and correct. I/We assure that it's an offence to submit / cause an innocent party(ies) suffered due to my/out complaint above and shall be held liable/subject to suit thereafter.			
Attended by Suria Jaya Management / appointed Management Firm:-			
Name	Date		