

# SURIA JAYA MANAGEMENT CUSTOMER CARE FORM - COMPLAINT

DETAILS			
Owner's Name		Unit No.	
IC No.		Date	
Complaint By	OWNER / OWNERS REPRESENTATIVE	Acc. Parcel	
Contact No.		Email	
Attended By:	Name / Department		
Contact	012-4701504 / 03-80767768	<a href="mailto:admin.mgt@ancubic.com">admin.mgt@ancubic.com</a>	
Handling Schedule (fill by SJ. MGT Only)*	Date Submit by Owner	Date Received by SJ. MGT / COW	Date Completed
	1)		
	2)		
Area	Complaint Description		
Comments			
<p>Confirmed Submitted by <b>Owner / Owner's Representative</b> of the above property:-</p> <p><b>Name:</b></p> <p><b>Date:</b></p> <p>I/We ..... ( Name &amp; IC No. ) hereby confirm and undertake acknowledge to have written the above true and correct. I/We undertake no default/damages caused by me/us prior to the above event and further undertake to indemnify you and/or to keep you fully indemnified against all claims, suits, actions, prosecutions fines, loses, damages, costs and expenses which may be instituted against or otherwise incurred or suffered by yourselves in connection or arising from the above.</p>			

Attended by <b>Suria Jaya Management</b> / appointed Management Firm:-	Remarks / CC :	
Name	Date	Expected Date of Completion:
<p>Note: The SJ Management appreciate your comment on the above an we will do our best to attend to the issue/matter written herein, subject always to our discretion on handling of this issue/matter. Our liaison officer will be in contact with you shall we need further clarification on the above and/or matter have been resolved and failure to reach you, as the case may be, within Seven (7) days from the notification or expiration of the same whereupon it shall automatically lapse/terminated and have no further effect and neither party shall have any right to any claim demand or action whatsoever against the other.</p>		