

Customer Complaint Form

Registered customer Name			
Apartment			A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> F <input type="radio"/>
Registered Mobile			
Registered Email			
Date DD\MM\YYY			

Nature of Complaint

<input type="radio"/> High Consumption
I believe my consumption for the month of _____ is higher than usual. I would like to request a meter inspection for the same.
<input type="radio"/> Low Cooling
Despite keeping a temperature at low and having my AC serviced & filters cleaned the cooling in the apartment is still not sufficient. I would like to request an inspection for supply of district cooling water to my apartment.
<input type="radio"/> Incorrect Billing
I believe my bill for the month of _____ is incorrect and would like a review for the same.
<input type="radio"/> Online Payment Not Reflecting
I have made a payment of AED _____ online using my Credit/Debit card ending with _____ on the DD \MM \YYYY and my payment was successful however the same is not reflecting against my account.
<input type="radio"/> Bank Transfer
I have transferred an amount of AED _____ on DD \MM \YYYY against apartment number _____ through _____ bank however the same is not reflecting against my account.
<input type="radio"/> Bill Allocation
I have paid an amount of AED _____ on DD \MM \YYYY against apartment number _____ using Cash\Credit Card\Online however the amount needs to be reallocated to apartment number _____

I understand that the resolution of the above made complaint is subject to Alpha Utilities Management Policies & Procedures and that It may take up to 48 working hours for a resolution.

Customer Signature:

Complaint Received By: