

Feedback Form

Compliments / Complaints / Suggestions

Emprise Mobility is committed to providing high quality products and services. Please let us know what we do well and where we can improve our services.

If you have a complaint, we are sorry that you are unhappy. Please let us understand the issue and see how we can help.

Date: _____

This is a: Compliment Complaint Suggestion

If this is a complaint, how urgent is it that we respond/take action:

- Urgent – it is significantly impacting my health and well-being, and needs action
- Soon – but not urgent
- No rush, but I do need it fixed.

Do you want to remain anonymous?

Yes No

If you choose to remain anonymous, Emprise Mobility will action your feedback but will not be able to respond to you directly. *(If you wish to remain anonymous, please proceed to Section 2, and complete Sections 2 through 4)*

Section 1: Your details

First Name:	Last Name:
Postal address:	
Telephone number:	Mobile number:
Email address:	
ID Number (e.g. NDIS Participant ID, DVA Card Number):	

How would you prefer we contact you regarding this matter?

Phone Email Letter (mail)

If appropriate, person on behalf of whom you are providing feedback

First Name:	Last Name:
Postal address:	
Telephone number:	Mobile number:
Email address:	
ID Number (e.g. NDIS Participant ID, DVA Card Number):	
Your relationship to this person:	

Section 2: Details of the Goods or Service

Please provide as many details as you can about the goods or services about which you are providing feedback.

Date of purchase or service	
Location at which the purchase was made	
Invoice Number (if applicable)	
Product and/or service	

Section 3: Please provide your feedback

Please provide details of your feedback, including what events led to making the complaint, compliment or suggestion, approximate dates and who was involved.

Section 4: What outcomes would you like as a result of providing your feedback?

Section 5: Privacy

Emprise Mobility is committed to protecting your privacy. We collect and handle personal information that you provide on this feedback form for the purpose of investigating and responding.

Emprise Mobility will only use your information in accordance with relevant privacy and other laws.

Thank you for taking the time to provide feedback about our products and services.
You can lodge this form at any of our stores, email to mobility@emprise.com.au or post to
Emprise Mobility 5 Sobek Pass, Bibra Lake WA 6163

If you have provided your contact details, we will be in touch shortly.