

CUSTOMER SERVICE FORM
Public Request/Compliment/Complaint/Suggestion Form



CITY OF CHINO

Attention: Human Resources Department
13220 Central Avenue, Chino, CA 91710
(909) 334-3274 fax (909) 334-3726

For Citizen's Use. When completed submit to Director of Human Resources.

Date _____

Name _____ Phone Number _____

Address _____

Email Address _____

Location or Nature of Concern or Request _____

Description of Request/Compliment/Complaint/Suggestion.

1. Send Customer Service Form to: Director of Human Resources, City of Chino, 13220 Central Avenue, Chino, California 91710. This form may also be submitted by fax or email to hr@cityofchino.org.
2. Human Resources Department will acknowledge receipt and route to Lead Department(s) for response.
3. Lead Department(s) will return completed response to the Director of Human Resources.
4. Director of Human Resources will provide response to customer when appropriate.

Received by _____ Received date _____
Staff Member

(For internal tracking.)

Via:

U.S. Mail Phone Over the Counter E-Mail

Lead Department(s):

Administration Police
Community Services Public Works/Engineering
Development Services
Finance Other _____
Human Resources
