



## CUSTOMER FEEDBACK FORM

Receiving feedback from our customers, whether positive or constructive, plays an important role in the development of continuous improvement of our quality management and customer service expectations. With this feedback form we seek to:

- Identify and address any instances of non-conformity of orders and/or products received by the customer.
- Identify and correct product and process deficiencies.
- Assess areas for product and process improvements when needed.

### CUSTOMER INFORMATION:

<b>COMPANY NAME</b>	<b>CONTACT NAME</b>
<b>ADDRESS</b>	<b>COUNTRY, CITY, STATE ZIP</b>
<b>PHONE</b>	<b>EMAIL</b>

### PRODUCT INFORMATION:

**PRODUCT PART#** **RI ORDER#** **CUSTOMER PO#**

### FEEDBACK INFORMATION:

<b>DATE OF ISSUE</b>	
<b>DETAILS OF ISSUE OR DESCRIPTION:</b>	
<b>ACTION REQUESTED:</b>	<b>YES OR NO?</b>

**ADDITIONAL COMMENTS:** Form can be sent to Tina Bowen at [tbowen@richardsind.com](mailto:tbowen@richardsind.com).

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