

Customer Complaint Form

	Contact Information					
	Name: Address:					
	Phone:					
	Email:					
	Incident Information Fixed Route	☐ Paratransit	Other			
	Date of incident:	Time	of incident:	Route #:	Vehicle #:	
	Location of Incident:		<u>Name</u>	of Employee Involved:		
	Detailed Description of Complaint:					
	Do you want staff to contact you regarding this complaint? ☐ Yes ☐ No					
	Submit your request:					
	In-person at Padgett Station (520 North 3 rd St) or Forden Station (505 Cando St) Email: info@wavetransit.com Mail: Wave Transit, P.O. Box 12630, Wilmington, NC 28405					
01	fice Use Only - Staff name:		Date received:			