Guest Complaint Resolution Form

| Guest Name | |
|--------------------------|----------|
| | |
| Date | |
| | |
| Time | |
| | |
| Contact Information | |
| Table (Aug.) | |
| Table/Area | |
| Complaint Type | |
| Somplant Type | • |
| Description of Complaint | |
| | |
| A stillar Tallar | |
| Action Taken | |
| | |
| Staff Name(s) Involved | |
| | |
| Resolution Provided | |
| | |
| | |
| Manager's Comments | |
| | |
| | |