

Kerr Lake Regional Water System
Customer Comment/ Complaint Form

Customer Name: _____

Customer Address: _____

Phone Number: _____

Best time to contact customer: _____

Comment/Complaint:

If you have a complaint or problem, choose the item from the following list that best describes your problem:

Odor _____ Discolored _____ Bad Test _____
Particles _____ Low Pressure _____ Other _____

Explain items selected:

Mail this form to the KLRWS at P.O. Box 1434, Henderson, NC 27536
Or, you may fax it to 252-438-7866