



## Access to Services Customer Feedback Form

**We welcome your comments and inquiries.**

**Please take a few moments to assist us in achieving a higher level of customer satisfaction.**

**Location Visited:** Administrative Office  Ganaraska Forest Centre   
Other Location  [Please click here to specify other location visited](#)

**Date of Visit:** [Please click here to enter a date.](#)

**Purpose of Visit:** [Please click here to enter text.](#)

**Was our service provided to you in an accessible manner?** Yes  or No

**Suggestions for Improvement:**

[Please click here to enter suggestions for improvement.](#)

**Additional Comments:**

[Please click here to enter text.](#)

**Would you like a Ganaraska representative to contact you regarding your feedback?**

Yes  or No

If you would like a response to your comments, please provide your contact information below:

**Contact Information:**

**Name:** [Please click here to enter your name](#)

**Phone Number:** [Please click here to enter your phone number](#) and/or **Email:** [Please click here to enter email](#)

The Ganaraska Region Conservation Authority collects and will use your personal information for the purpose of following up with you regarding your comments. Authority to do so is pursuant to Section 29(2) of the Municipal Freedom of Information and Protection of Privacy Act, 1990, M-59 and pursuant to the Conservation Authorities Act, 1990, Chapter C.27 as amended. **Questions about this information collection should be directed to the Ganaraska Region Conservation Authority 2216 County Road 28, Port Hope, ON L1A 3V8 Attention: Linda Laliberte, CAO/Secretary-Treasurer**