

CUSTOMER SERVICE REQUEST FORM

**PLEASE MAIL OR
FAX TO:**

**The Salient Group
#6 Gaolers Mews – 209 Carrall Street
Vancouver, BC V6B 4K7
PHONE 604-669-5536
OR FAX TO: 604-669-5574**

NAME: _____

ADDRESS: _____

TEL: RESIDENCE: _____ BUSINESS: _____ OTHER: _____

DATE OF REQUEST: _____

SERVICE REQUESTS:

1.	
2.	
3.	
4.	
5.	

Once we have received a copy of your request form, we will contact you to review the requests, and to schedule any necessary appointments.