



## CUSTOMER ACTION SHEET

(For Walk-in Clients)

Date: \_\_\_\_\_

Name of Requesting Party: \_\_\_\_\_

Telephone/Fax/Cellphone Number.: \_\_\_\_\_

Office Address: \_\_\_\_\_

Residence Address: \_\_\_\_\_

Particulars of Request:

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Action Taken:

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- ☐ Easy (procedural queries)
- ☐ Medium (clarification queries)
- ☐ Difficult (requesting action officer to provide technical expertise by doing the work himself/herself)

\_\_\_\_\_  
Signature of Requesting Party

\_\_\_\_\_  
Action Officer

\*You may use the back page for additional information.