



AODA Customer Service Standards - Customer Feedback Form

Thank you for visiting Max Insurance. We value all of our customers and strive to meet everyone's needs.

1. Were you satisfied with the customer service we provided you? (Please indicate your response(s) by circling or highlighting the chosen field)

<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Somewhat
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Comments

2. Was our customer service provided to you in an accessible manner?

<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Somewhat
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Comments

3. Did you experience any problems accessing our services?

<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Somewhat
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Comments

Contact Information (optional)

Name: _____ Phone Number: _____

Email: _____

Thank you,

Management

By Mail: 50 Queen St N #710, Kitchener, ON N2H 6P4

By Email: ombudsman@maxinsurance.ca

By Phone: 1-877-770-7729