



901 Spring Street, Elizabeth, NJ 07201 Tel: 973-263-2009  
Servicing 500 Thousand Customers since 2001 at Newark Airport

## Complaint Form:

Please fill out the entire form and fax it to: 973-263-2223

### BUSINESS INFORMATION:

Business Name: \_\_\_\_\_

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

City, State & Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Website: \_\_\_\_\_

Email: \_\_\_\_\_

### CONTACT INFORMATION:

Full Name: \_\_\_\_\_

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

City, State & Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Please fill out the entire form and fax it to: 973-263-2223

Today's Date: \_\_\_\_\_

What motivated you to park at EZway Parking?

Referral ☐ Coupon ☐ Internet Ad ☐ Other ☐

How often do you park at EZWay Parking? *Check One Box:*

1<sup>st</sup> time ☐ Once Year ☐ 2-12 Year ☐ 2-12 Monthly ☐

What was the Parking managers name at the time of checkout?  
\_\_\_\_\_

Did you book a reservation from [www.EZwayParking.com](http://www.EZwayParking.com) ? Yes ☐ No ☐

How much did you pay? \$ \_\_\_\_\_

Currently, how many days did you park with EZway? \_\_\_\_\_

What was your total balance including Tax? \$ \_\_\_\_\_

What did you pay upon check out at our parking lot? \$ \_\_\_\_\_

Did you sign your Valet Ticket upon **Check-In** when you first arrived at

EZWay Parking? Yes ☐ No ☐

Customers Signature: \_\_\_\_\_

Date Of Submission: \_\_\_\_\_

### Vehicle Info:

License Plate #: \_\_\_\_\_

Year: \_\_\_\_\_

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Color: \_\_\_\_\_

### Parking Info:

Valet Ticket #: \_\_\_\_\_

**Reservation Confirmation #:** \_\_\_\_\_

**Date Of Complaint or Incident:** \_\_\_\_\_

Customers Signature: \_\_\_\_\_

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

**Nature Of Complaint:** Lost or Missing Property ☐ Damage to Vehicle ☐ Financial Issue ☐ Other ☐

**(Office us only) Managers Comments:**