

BOARD MEMBERS OF THE AUTHORITY

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H. A. MCKAIG, VICE CHAIRPERSON
TRAVIS DANIEL, SECRETARY AND TREASURER
WILLIAM H. PULLEN, JR.
DARRELL PARDUE



MANAGEMENT

SHERRI WALKER, INTERIM GENERAL MANAGER
ELIZABETH ZELLER, OFFICE MANAGER
BOBBY L CLOUD, DISTRIBUTION MANAGER
FRANK HAWKINS, PLANT MANAGER

P.O. BOX 1047
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Customer Complaint Form

Name:	Date:
Address:	Daytime Contact Info:
COMPLAINT DETAILS (Fill Out all applicable details)	
Date of Incident:	Time:
Location of Incident:	
Who/What is the Subject of Your Complaint:	
Summary of Complaint/Issue:	
Preferred Outcome/Suggested Solution:	
Signature:	Date: