

REGRET ENQUIRY FORM

Customer Name & Address	Enquiry No / Date	Received by & Date
	Regret enquiry Form No & Date	
Contact Details	Enquiry Reference	Enquiry Received through
		<input type="radio"/> Email <input type="radio"/> Courier <input type="radio"/> Verbal <input type="radio"/> Others..
Product Enquired	Technical / Specific Requirements	
Reason For regretted.		
<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		
Possibilities of Acceptance, if enquiry amend:		
We apologize for the inconvenience.		

Format No. Rev. No. Rev. Date.	Soft copy C.C. to: Contact:	 Authority Sign.
---	--	---