

FEEDBACK AND CONCERN FORM

For tenants to submit feedback or concern on facility-related issues

The completed form can be submitted via hand or email to helpsupport@permodalansatok.com.my

Reference No.	PSB/FCF/2026/		
Date Submitted		Time Submitted	
Priority Level	☐ Low ☐ Medium ☐ High ☐ Urgent	Status	☐ New ☐ In Progress ☐ Completed
A. REQUEST DETAILS			
Name of Requestor			Designation
Company Name			Contact No.
B. DETAILS OF FEEDBACK / CONCERN			
Specific Location	☐ Toilet Area ☐ Parking Bay ☐ Common Area ☐ Ballroom (Event Centre) ☐ Kitchen Area (Event Centre) ☐ Others: _____ ☐ Function Room (Please Specify) : _____		
Tower	☐ Tower 1 ☐ Tower 2 ☐ Event Centre ☐ Concourse		
Level / Floor			
Type of Damage (Common Area only)	☐ Air-Conditioning (including the premises) ☐ Plumbing / Water Leakage ☐ Lift / Escalator ☐ Ceiling / Wall / Floor ☐ Others: _____		
Details of Damage			
Date Damage Noticed		Time Noticed	
Affecting Work / Safety?	☐ Yes ☐ No		
If yes, please explain			
C. ACCESS ARRANGEMENT			
Access Required	☐ During Office Hours ☐ After Office Hours		
Preferred Maintenance Date & Time			
D. FOR FMM USE ONLY			
Received By			Date / Time Received
Action Required?	☐ Yes ☐ No	Service Request Ref. No.*	

**Note: Where maintenance or repair action is required, the matter shall be transferred to the Service Request Form for further assessment, action and completion.*