



ZUNI ENTREPRENEURIAL ENTERPRISES, INC.

604 E Coal Ave
Gallup, NM 87301
Phone: (505) 863-7444
Fax: (505) 863-4590

Complaint/Commendation Form

Passenger Name: _____ Date: _____

☐ I wish to remain anonymous

Complaint: Please include the following information: Date and time of the incident, employee(s) of the organization involved, the nature of the complaint and other relevant information. Please be as specific as possible. Each driver is required to wear identification, ask for this identification. Each vehicle is assigned a fleet number, i.e., Z-20, request this information as well, it will help us resolve the problem. You may either mail this card to the address stated above or call the agency with your information using the telephone number listed above. Thank you for helping us improve our transportation services.

Commendation: It is important for us to know how our drivers treat passengers. If you received services that deserve a commendation (praise), please let us know. You may use the following space for that purpose. Please be as specific as possible. Each driver is required to wear identification, ask for this identification. Each vehicle is assigned a fleet number, i.e., Z-20, request this information as well. We will ensure the driver is commended for such services provided. Thank you for helping us improve our transportation services.

Please be assured that information provided will remain confidential and will be used only for the purpose of enhancing the quality of our transportation services. Thank you.

“Creating Independence through Involvement”