



Check one:
LCTA Bus _____
LCTA Shared Ride _____

Date Received: _____
Received By: _____
Complaint _____
Commendation _____

Customer's Name (optional) _____
Address _____ Phone _____
_____ Zip Code _____

Date of Incident _____ Time: _____ A.M. ___ Inbound ___ Bus # _____
P.M. ___ Outbound ___ Van # _____
Route # _____

Employee's Name (if known) _____ Location _____

OPERATIONS _____ INFORMATION SERVICES _____ MARKETING _____
ADMINISTRATION _____ PLANNING _____ MAINTENANCE _____

- | | | |
|--|--|--|
| <input type="checkbox"/> Driver attitude/conduct | <input type="checkbox"/> Bus did not show | <input type="checkbox"/> Route protest |
| <input type="checkbox"/> Careless driving/comfort | <input type="checkbox"/> Off Route | <input type="checkbox"/> Stop signs/Shelters |
| <input type="checkbox"/> Early | <input type="checkbox"/> Fare/Trans. Dispute | <input type="checkbox"/> Service Request |
| <input type="checkbox"/> Motor run/lights on at terminal | <input type="checkbox"/> Wrong Signage | <input type="checkbox"/> Passed By |
| <input type="checkbox"/> Overload | <input type="checkbox"/> Accident | <input type="checkbox"/> Other |

Customer's Remarks: _____

**Completed form may be given to Luzerne County Transportation Authority Customer Service
Martz Bus Terminal 47 Rear South Washington Street Wilkes-Barre PA 18701 or mailed to:
Luzerne County Transportation Authority 315 Northampton Street Kingston PA 18704.**