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| **Código de la queja:** | | | | |  | | | | | | | | | **Fecha:** | | | |  | |  |  | |
| 1. **DATOS DEL RECLAMANTE** | | | | | | | | | | | | | | | | | | | | | | |
| **Nombre/ Empresa:** | | | |  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | **R.U.T.:** |  | | | | | |
| **Dirección:** | |  | | | | | | | | | | | | | | | | | | | | |
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| **Ciudad:** |  | | | | | | | | | **Teléfono(s)** | |  | | | | | | | | | | |
| **Persona de contacto:** (Llene en caso de ser Persona Jurídica) | | | | |  | | | | | | | | **Correo electrónico:** | | | |  | | | | | |
| 1. **DESCRIPCIÓN DEL SERVICIO NO CONFORME (si aplica)** | | | | | | | | | | | | | | | | | | | | | | |
| **Orden de trabajo N°:** | | | | | | | | | | | | | | | | | | | | | | |
| **Servicio solicitado:** | | | | | | |  | | | | | | | | | | | | | | | |
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| 1. **PROBLEMA ENCONTRADO** | | | | | | | | | | | | | | | | | | | | | | |
| **Fecha del evento:** | | |  | | | | | | | | | | | | | | | | | | | |
| **Descripción del problema:** | | | | | |  | | | | | | | | | | | | | | | | |
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| 1. **¿SUGIERE UNA SOLUCIÓN?** | | | | | | | | | **SÍ** | | | | | | | |  | | **NO** | | |  |
| **En caso de ser positiva su respuesta, indique la solución propuesta:** | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **FECHA:** | | |  | | | | |  |  | | **FIRMA:** | | | |  | | | | | | | |
| 1. **DOCUMENTOS ADJUNTOS:** | | | | | | | | |  | | | | | | | | | | | | | |
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