



Accessibility Feedback Form

Nutrafarms Inc. is committed to improving accessibility for individuals with disabilities.

We would like to hear your comments, questions, and suggestions about the provision of our goods or services to individuals with disabilities.

Please tell us the date, time and location of your visit:

Date: _____

Time: _____

Location: _____

Did we respond to your customer service needs today? YES NO

Was our service provided to you in an accessible manner?

YES SOMEWHAT NO (please explain below)

Did you have any problems accessing our services?

YES SOMEWHAT NO (please explain below)

Do you have any other comments to help us better serve individuals with disabilities?

Thank you,
Nutrafarms Inc.