

GULHIFALHU DREDGING AND RECLAMATION PROJECT

Feedback Form

1. INFORMATION ABOUT YOU	
First Name:	Last Name:
Location:	Email:
2. YOUR MESSAGE	
Date:	
For gulhifalhu.mv use only	
Received Date:	Reference Number:
Time:	Registered Date:

Email the completed form to clo@infrastructure.gov.mv .

Attach any documents or pictures with your email.