

# CUSTOMER FEEDBACK FORM - INSTALLATIONS

Please Give us a minute of your time to help us better serve your needs.

Customer Name:

Mr. KASUN Abeyanawardenne

Date :

	Very Good	Good	Average	Poor	Very Poor
Was the work completed to your satisfaction?	✓				
Was the work completed on time?				✓	
Was the job site left clean and orderly?	✓				
Were the installers profession and courteous?	✓				
Was the Customer Service Representative courteous and helpful?	✓				
Were the user instructions easy to understand?	✓				
Were your questions answered to your satisfaction?	(Yes / No)				

How did you hear about us?

- Yellow Pages
- Rainbow Pages
- Through a friend
- Billboard
- E-mail campaign
- Other

✓

Comments:

Customer's Signature