

# CUSTOMER FEEDBACK FORM - INSTALLATIONS

Customer Name:

Solami

Date :

13 / 11 / 2018

|  | 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

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Comments:



Customer's Signature