<!DOCTYPE html>

<html lang="en">

<head>

<meta charset="UTF-8">

<title>Velocity Motors Customer Feedback Form</title>

<style>

body {

font-family: Arial, sans-serif;

padding: 30px;

background: #f9f9f9;

}

h2 {

text-align: center;

margin-bottom: 20px;

}

.form-section {

background: #fff;

padding: 20px;

margin-bottom: 20px;

border-radius: 8px;

box-shadow: 0 0 5px rgba(0,0,0,0.1);

}

label {

display: block;

margin-top: 15px;

font-weight: bold;

}

input[type="text"], input[type="date"], textarea {

width: 100%;

padding: 8px;

margin-top: 5px;

border: 1px solid #ccc;

border-radius: 4px;

}

.options {

margin-top: 10px;

}

.options label {

font-weight: normal;

margin-right: 15px;

}

.grid-table {

width: 100%;

border-collapse: collapse;

margin-top: 10px;

}

.grid-table th, .grid-table td {

border: 1px solid #ccc;

padding: 8px;

text-align: center;

}

.scale {

display: flex;

justify-content: space-between;

margin-top: 10px;

}

.scale label {

flex: 1;

text-align: center;

}

button {

margin-top: 20px;

padding: 10px 20px;

background: #d32f2f;

color: white;

border: none;

border-radius: 4px;

cursor: pointer;

}

button:hover {

background: #b71c1c;

}

</style>

</head>

<body>

<h2>Velocity Motors Customer Feedback Form</h2>

<form>

<div class="form-section">

<label>Customer Name:</label>

<input type="text" name="customerName">

<label>Plate Number:</label>

<input type="text" name="plateNumber">

<label>Service Date:</label>

<input type="date" name="serviceDate">

<label>Branch:</label>

<input type="text" name="branch">

</div>

<div class="form-section">

<label>1. Booking Experience:</label>

<div class="options">

<label><input type="radio" name="booking" value="Very Easy"> Very Easy</label>

<label><input type="radio" name="booking" value="Easy"> Easy</label>

<label><input type="radio" name="booking" value="Neutral"> Neutral</label>

<label><input type="radio" name="booking" value="Difficult"> Difficult</label>

<label><input type="radio" name="booking" value="Very Difficult"> Very Difficult</label>

</div>

</div>

<div class="form-section">

<label>2. Service Day Experience:</label>

<table class="grid-table">

<tr>

<th>Item</th>

<th>Excellent</th>

<th>Good</th>

<th>Fair</th>

<th>Poor</th>

</tr>

<tr>

<td>Courtesy of Staff</td>

<td><input type="radio" name="staff" value="Excellent"></td>

<td><input type="radio" name="staff" value="Good"></td>

<td><input type="radio" name="staff" value="Fair"></td>

<td><input type="radio" name="staff" value="Poor"></td>

</tr>

<tr>

<td>Waiting Time</td>

<td><input type="radio" name="waiting" value="Excellent"></td>

<td><input type="radio" name="waiting" value="Good"></td>

<td><input type="radio" name="waiting" value="Fair"></td>

<td><input type="radio" name="waiting" value="Poor"></td>

</tr>

<tr>

<td>Accuracy of Service Time Estimate</td>

<td><input type="radio" name="accuracy" value="Excellent"></td>

<td><input type="radio" name="accuracy" value="Good"></td>

<td><input type="radio" name="accuracy" value="Fair"></td>

<td><input type="radio" name="accuracy" value="Poor"></td>

</tr>

<tr>

<td>Quality of Work Performed</td>

<td><input type="radio" name="quality" value="Excellent"></td>

<td><input type="radio" name="quality" value="Good"></td>

<td><input type="radio" name="quality" value="Fair"></td>

<td><input type="radio" name="quality" value="Poor"></td>

</tr>

<tr>

<td>Cleanliness of Vehicle After Service</td>

<td><input type="radio" name="cleanliness" value="Excellent"></td>

<td><input type="radio" name="cleanliness" value="Good"></td>

<td><input type="radio" name="cleanliness" value="Fair"></td>

<td><input type="radio" name="cleanliness" value="Poor"></td>

</tr>

</table>

</div>

<div class="form-section">

<label>3. Communication:</label>

<div class="options">

<label><input type="radio" name="communication" value="Yes, frequently"> Yes, frequently</label>

<label><input type="radio" name="communication" value="Yes, but not enough"> Yes, but not enough</label>

<label><input type="radio" name="communication" value="No"> No</label>

</div>

</div>

<div class="form-section">

<label>4. Payment Experience:</label>

<div class="options">

<label><input type="radio" name="payment" value="Very Convenient"> Very Convenient</label>

<label><input type="radio" name="payment" value="Convenient"> Convenient</label>

<label><input type="radio" name="payment" value="Neutral"> Neutral</label>

<label><input type="radio" name="payment" value="Inconvenient"> Inconvenient</label>

</div>

</div>

<div class="form-section">

<label>5. Overall Satisfaction:</label>

<p>On a scale of 1–10, how likely are you to recommend Velocity Motors to a friend or family?</p>

<div class="scale">

<label><input type="radio" name="recommend" value="1"> 1</label>

<label><input type="radio" name="recommend" value="2"> 2</label>

<label><input type="radio" name="recommend" value="3"> 3</label>

<label><input type="radio" name="recommend" value="4"> 4</label>

<label><input type="radio" name="recommend" value="5"> 5</label>

<label><input type="radio" name="recommend" value="6"> 6</label>

<label><input type="radio" name="recommend" value="7"> 7</label>

<label><input type="radio" name="recommend" value="8"> 8</label>

<label><input type="radio" name="recommend" value="9"> 9</label>

<label><input type="radio" name="recommend" value="10"> 10</label>

</div>

</div>

<div class="form-section">

<label>6. Suggestions for Improvement:</label>

<textarea rows="4" name="suggestions"></textarea>

</div>

<button type="submit">Submit Feedback</button>

</form>

</body>

</html>