

D J STANIFORTH & CO

CUSTOMER SATISFACTION SURVEY

Your Name: Mr & Mrs S. [redacted]

Your Address: [redacted] Street, Strathfield, NSW 2135

Communication

- | | n/a | yes | no |
|---|--------------------------|-------------------------------------|--------------------------|
| 1. Did you find our Company easy to contact? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Was our office staff courteous at all times? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Were your enquiries properly addressed? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Was our response to your enquiry satisfactory? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Comments:

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Sales Staff

- | | | | |
|---|--------------------------|-------------------------------------|--------------------------|
| 5. Did our sales person attend to your appointment on time? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Did our sales person answer all your questions? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Was our sales person's product knowledge satisfactory? .. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Were the product brochure's adequate? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Comments:

Chris was very helpful.

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Work Carried Out

- | | | | |
|---|--------------------------|-------------------------------------|--------------------------|
| 9. Did the work carried out meet your requirements? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 10. Was the work carried out in a professional manner? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 11. Was our installation crew on time? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12. Was our installation crew courteous & well presented? ... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 13. Did our installation staff leave your premises clean & tidy? .. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Comments:

Installation was undertaken in a very professional manner.