

D J STANIFORTH & CO

CUSTOMER SATISFACTION SURVEY

Your Name... *Rosie Black*

Your Address... ~~XXXXXXXXXX~~ *Greenacres*

Communication

n/a yes no

- 1. Did you find our Company easy to contact?
- 2. Was our office staff courteous at all times?
- 3. Were your enquiries properly addressed?
- 4. Was our response to your enquiry satisfactory?

Comments: *Fantastic & friendly -
felt like talking to a friend :)*

Sales Staff

- 5. Did our sales person attend to your appointment on time?
- 6. Did our sales person answer all your questions?
- 7. Was our sales person's product knowledge satisfactory? ..
- 8. Were the product brochure's adequate?

Comments: *Great guy & very
knowledgeable & helpful :)*

Work Carried Out

- 9. Did the work carried out meet your requirements?
- 10. Was the work carried out in a professional manner?
- 11. Was our installation crew on time?
- 12. Was our installation crew courteous & well presented? ...
- 13. Did our installation staff leave your premises clean & tidy?

Comments:

exp. :)

Satisfaction

- | | | | |
|-----------------------------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|
| | n/a | yes | no |
| 14. Was the work carried out to your satisfaction? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 15. Would you recommend our company to other people? ... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 16. Is there anything that you think we could do to
improve our service? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Comments: *Very satisfied with all aspects - nothing was a problem so very confident to recommend :)*

Further Discussion

17. Would you like us to contact you to discuss your comments above or anything else?

No *All good* Yes

My Name is:

My Phone Number is:

My Email Address is:

Thank you for taking the time to complete this survey.

*Thank you too :)
Rosie*

Office use only (to be completed by the Quality Manager)

Date Sent to Client:.....		Date Received From Client:	
Follow up/actions required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Follow up/actions completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date follow up/actions completed	