

Customer Satisfaction Questionnaire

Address: Type of work carried out. Type of wor	Client name:
The following questions can be answered by ticking the appropriate box, on a scale where 5 = excellent, 4 = good, 3 = average, 2 = not very good and 1 = very poor. 1. How satisfied are you with the quality of our products? 50 40 30 20 10 2. How was the overall quality of our service until the finalization of the building project? 50 40 30 20 10 3. How punctual were our workmen? 50 40 30 20 10 4. How polite and friendly were they? 50 40 30 20 10 5. How clean and tidy did they leave their work site at the end of each day? 50 40 30 20 10 6. If you had concerns during the course of the work being carried out, how well do you consider we addressed them? 7. Was there one particular member of our team who you found to be outstanding in his/her overall manner, presentation and professionalism with the work? If so, who was it?	Address: LA JOYAIS, WS 6 MAT DE MATEREUD CWE
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