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| **Customer**  **Details:** |  |

We make a serious commitment to customer satisfaction and are constantly looking at ways in which

our products and services can be improved to the benefit of our customers. We would appreciate it if

you could spend a few minutes completing our questionnaire to help us to help you in the future.

Please complete the following sheet entering a \* where appropriate, the scoring system is as follows: 1 = poor

3 = average & 5 = excellent.

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| Aspect of product/service provided: | **1** | **2** | **3** | **4** | **5** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Ease of contacting our office. |  |  |  |  |  |
| Response speed to your enquires. |  |  |  |  |  |
| How well did we meet your requirements? |  |  |  |  |  |
| How satisfied are you with our products? |  |  |  |  |  |
| Overall impression of our service. |  |  |  |  |  |
| Would you recommend us to others? | Yes |  | No |  |  |

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| --- |
| Please use this space to add any comments on how you feel we could improve our service. |

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| For office use only |  |  |  |  |  |
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