

We would like to thank you for allowing us to assist you in the customer satisfaction and we can only achieve success in meeting our

Each home is unique with its differing needs and characteristics, expectations and requirements. We would like to know how we did

We trust that you were happy with the service you received and a few moments to fill out our customer survey and returning it in the enclosed self addressed stamped envelope.

For each item identified below, circle the number that best fits your judgment of its quality.

1=Excellent 2=Very Good 3=Good 4=Fair 5=Poor

1. Initial telephone contact and response	<input checked="" type="radio"/> 1	2	3	4	5
2. Promptness & professionalism of estimate received.	<input checked="" type="radio"/> 1	2	3	4	5
3. Questions & concerns addressed professionally.	<input checked="" type="radio"/> 1	2	3	4	5
4. Promptness of crew. <i>too prompt!</i>	<input checked="" type="radio"/> 1	2	3	4	5
5. Appearance and neatness of crew.	<input checked="" type="radio"/> 1	2	3	4	5
6. Overall quality of work done.	<input checked="" type="radio"/> 1	2	3	4	5
7. Cleanliness of work area upon completion of job.	<input checked="" type="radio"/> 1	2	3	4	5
8. Did you feel that you received a fair price for the work done?	<input checked="" type="radio"/> YES			NO	
9. Would you use our services again?	<input checked="" type="radio"/> YES			NO	
10. Can we use your name as a reference?	<input checked="" type="radio"/> YES			NO	
11. How did you hear about us? <i>sign up on Bishop's Lane</i>					
12. Do you have any possible future painting needs? If so, what type and when may we call you? <i>next year (will call)</i>					

Complete Customer Satisfaction Is Our Goal

NAME: Nancy W. W.
 STREET: _____
 CITY: Alexandria STATE: VA. ZIP: 22304