

**PLEASE HELP US IMPROVE
SIR Inc. CUSTOMER SERVICE SURVEY FORM**

Your First name: WILLIAM
 Date of service: 06-16-2010 INSPECTION City and State: BLAIRSVILLE, GA 30512
REPAIRS

	Excellent	Good	Fair	Poor
Office staff was courteous and helpful.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff provided complete, accurate information for you.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A timely response was provided.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Our construction team was professional and courteous.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Our construction team made you feel safe and were clean.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My overall experience with SIR Inc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate the name(s) of any staff or worker you would like to commend:

*I DON'T REMEMBERED THEIR NAMES, BUT
BOTH GUYS DID EXCELLANT WORK,
EAC.*

If you feel we fell short in meeting your service expectations, please describe the situation, including the name of the person involved and the date of the incident occurred:

As a result of your experience with us, what service-related improvement can you recommend?

We thank you for your time; please kindly mail back this form or fax back to **678-866-2524**