

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

Your First name: JOHN

Date of service: _____ City and State: LAWRENCEVILLE, GA.

Excellent Good Fair Poor

Office staff was courteous and helpful. EXCELLENT

Staff provided complete, accurate information for you. EXCELLENT

A timely response was provided. EXCELLENT

Our construction team was professional and courteous. EXCELLENT

Our construction team made you feel safe and were clean. EXCELLENT

My overall experience with SIR Inc. EXCELLENT

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

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:

N/A

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

N/A

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