

PLEASE HELP US IMPROVE SIR Inc. CUSTOMER SERVICE SURVEY FORM

Your First name: MERLE

Date of service: _____ City and State: SWANEE GA 30024

	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 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"/>

I WAS NOT
AT HOME
WHEN WORK
WAS DONE.

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:

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**