

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

Your First name: Tandy

Date of service: 9/16/11

City and State: Atlanta, GA

|  | 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:

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?

*Scheduling communication with customer*

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