

PLEASE HELP US IMPROVE SIR Inc. CUSTOMER SERVICE SURVEY FORM

Your First name: John

Date of service: _____ City and State: Smyrna, 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Our construction team made you feel safe and were clean.	<input 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:

It was not present for the inspection on the repair so most of this is not applicable.

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