



Customer Feedback Form

- **Contact Information**

Name of Organization: Name : Designation.....

Mailing Address:Email: Telephone :

Dear Customer, Your satisfaction is our success. In this regard, we need your valued feedback. It will help us to improve our services. Please tick the appropriate answer and send this form back at your earliest.

1. How do you feel about the response and behavior of our Commercial Team?

Excellent Good Satisfactory Need Improvement

If your answer is "Need Improvement" then please mention the specific area where you think we need improvement

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2. How do you feel about the response and behavior of our Technical Team?

Excellent Good Satisfactory Need Improvement

If your answer is "Need Improvement" then please mention the specific area where you think we need improvement

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3. How do you feel about the response you obtain for your inquiries and complaints?

Excellent Good Satisfactory Need Improvement

If your answer is "Need Improvement" then please mention the specific area where you think we need improvement

4. To what extent do you think you got the improvement in your system through our services?

Excellent Good Satisfactory Need Improvement

If your answer is "Need Improvement" then please mention the specific area where you think we need improvement

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5. How do you rate the overall quality of our services?

Excellent Good Satisfactory Need Improvement

If your answer is "Need Improvement" then please mention the specific area where you think we need improvement

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6. How do you feel about our team's competence?

Excellent Good Satisfactory Need Improvement

If your answer is "Need Improvement" then please mention the specific area where you think we need improvement

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Suggestions for Improvement / Comments

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Signature:

Date:.....