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FOLDING SHUTTER CORPORATION

CASTLE IMPACT WINDOWS

CUSTOMER COMMENT SURVEY

Thank you for your interest in Folding Shutter Corporation. We appreciate your patronage and would welcome your comments and/or suggestions about our product and the performance of our company. Please put a checkmark in the box of your desired answer.

Thank you!
see

How would you rate your experience with our Sales Representative?

Excellent	<input checked="" type="checkbox"/>
Good	<input type="checkbox"/>
Fair	<input type="checkbox"/>
Poor	<input type="checkbox"/>

Comment on selection: He answered all my questions. He was not pushy and showed me several options.

DCC

How would you rate your experience with our Customer Service Representative handling your questions, installation, etc?

Excellent	<input checked="" type="checkbox"/>
Good	<input type="checkbox"/>
Fair	<input type="checkbox"/>
Poor	<input type="checkbox"/>

Comment on selection: Every time I had a question, it was thoroughly and clearly answered. The follow-up time table sheet I received after

signing the contract helped me with expectations about installation, etc.

Did your technician appear professional and knowledgeable?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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Was all work performed in a professional manner?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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Was the product operation explained?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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thoroughly explained

LM

Did the technician answer all your questions and/or concerns?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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Was the cleanup after installation satisfactory?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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May we use you as a referral?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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Absolutely - feel free to bring neighbors by to see the work.

How would you rate your overall experience?

Excellent	<input checked="" type="checkbox"/>
Good	<input type="checkbox"/>
Fair	<input type="checkbox"/>
Poor	<input type="checkbox"/>

Comment on selection: _____

SUGGESTIONS:

Keep up the good work -

We would greatly appreciate your information below should we like to contact you regarding your responses above.

NAME REV. LOUIS GUERIN
 ADDRESS _____
 CITY BOYNTON BEACH STATE FL ZIP CODE _____