

03312014021 ✓

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!
Sue

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:

Very knowledgeable, Professional
Enjoyed working w/ him -

JG

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:

Did your technician appear professional and knowledgeable?

Yes

No

Very

mv/TB

Was all work performed in a professional manner?

Yes

No

Very

Was the product operation explained?

Yes

No

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

Yes

No

Was the cleanup after installation satisfactory?

Yes

No

Excellent

May we use you as a referral?

Yes

No

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:

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

NAME Harvey W. + Rosemarie Levack

ADDRESS _____

CITY West Palm Beach STATE FL ZIP CODE _____