


## Customer Feedback form

 <b>PSQCA</b>	<b>CUSTOMER FEED BACK</b>  <b>Quality Control Center</b>	F-04/01 Issue # : 02 Revision #: 02 Issue Date : 20/02/2007
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QCC Ref #: \_\_\_\_\_

Date: \_\_\_\_\_

Dear Customer,

Our major objective is to achieve the customer satisfaction and we are constantly putting in efforts to achieve this goal. In order to improve our services, we need your feed back and valuable suggestions. You are requested to fill in the following questionnaire and mail/fax it at the address given below.

**1. Feedback Regarding:**

Name of Section(s): _____ (Optional) Name of Person(s): _____
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**2. Name and address of the customer:**


**3. Delivery of Report**

Excellent	Good	Fair	Unsatisfactory
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**4. Response to enquiries**

Excellent	Good	Fair	Unsatisfactory
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**5. Response against complaints**

Excellent	Good	Fair	Unsatisfactory
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**6. Quality of service rendered**

Excellent	Good	Fair	Unsatisfactory
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**7. Attitude of our staff**

Excellent	Good	Fair	Unsatisfactory
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**8. Any weak area you want to identify:**

\_\_\_\_\_

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**9. Remarks/suggestions for further improvement:**

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\_\_\_\_\_

**10. Complaint (if any):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**Customer's Name and  
 Signature**

\_\_\_\_\_  
**Sample Superintendent**

\_\_\_\_\_  
**Quality Manager**