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Customer Satisfaction Survey

How did you become a Lifetime Fence customer?

☐ Family Referral ☐ Signs on Fences ☐ Neighbor Referral
☐ Direct Mail ☒ Google ☐ Website

	<u>Did Not Meet</u>	<u>Met</u>	<u>Exceeded</u>
<u>Customer Service Rep</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>Presentation of information</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>Project Manager</u>			
Courteous/Professional	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Listened well/Informative	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Timely follow up	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>Craftsmen</u>			
Notification upon arrival - ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Material delivery - was not here at time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disposal and Cleanup	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Overall Star Rating (may be used on web) 1 2 3 4 5			

Review:

Thanks for the great job!
June 2014 and January 2015

Our business depends on referrals from satisfied customers like you.

Fill this out and send it to us to receive a

25.00 GIFT CERTIFICATE!

Please Mail, Email, or Drop off Completed Survey to Our Home Office:

Lifetime Fence 1301 Justin Rd #106, Lewisville TX 75077

Referral:

Name: _____
E-Mail: _____
Phone Number: _____
Address: _____

Referral:

Name: _____
E-Mail: _____
Phone Number: _____
Address: _____