



Dear Mr & Mrs Hopkins

Order Ref: 2557.

Date: 24/12/20

As a long established local company we are keen to continually improve our service by learning from our customers.

We would appreciate it if you would help us by describing your overall impression of our service from your recent experience with us.

From the first phone call, to the showroom visit, then the survey to the installation, everything was to a very high standard. All staff either on telephone or face to face were a credit to your company. Very pleased with end result.

Please tick the boxes under the appropriate headings to indicate your response to each question.

Showroom experience

Table with 5 columns: Excellent, Good, Average, Poor, Disappointing. Rows: What was your impression of our showroom?, How would you describe our showroom staff? (Both have 'Excellent' checked)

Designer experience

Table with 5 columns: Excellent, Good, Average, Poor, Disappointing. Rows: How effective were we in understanding and interpreting your requirements correctly?, To what standard were the plans and visuals presented to you? (Both have 'Excellent' checked)

PLEASE TURN OVER

Technical Survey & Paperwork

	Excellent	Good	Average	Poor	Disappointing
How did you find the pre-installation survey?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How clear and thorough was our paperwork?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Installation

	Excellent	Good	Average	Poor	Disappointing
How would you describe the standard of installation work?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How would you describe the overall level of service provided by the fitters?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall

How would you rate our service and your experience?

Excellent	Very Good	Good	Average	Poor	Very Poor	Disappointing
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Would you recommend our services?

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

Many thanks for completing our survey. Your feedback is very much appreciated.

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