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CONSTRUCTION

Quality Group is committed to the vision of our clients. We would like your feedback on how you viewed your experience and your level of satisfaction with the work that we have done.

How did you find us? <input type="checkbox"/> Television Ad <input type="checkbox"/> Internet <input type="checkbox"/> Company Vehicles <input type="checkbox"/> Lawn Signs <input type="checkbox"/> Word of Mouth <input type="checkbox"/> Other:	The Estimator <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor	Was The Estimator... <input type="checkbox"/> Very informative <input type="checkbox"/> Informative <input type="checkbox"/> Somewhat Informative <input type="checkbox"/> Not Informative	The Office Staff <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor
Was The Office Staff... <input type="checkbox"/> Very Helpful <input type="checkbox"/> Helpful <input type="checkbox"/> Somewhat Helpful <input type="checkbox"/> Not Helpful	The Work Crew <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor	Was The Work Crew... <input type="checkbox"/> Always Courteous <input type="checkbox"/> Usually Courteous <input type="checkbox"/> Not Courteous	Was The Work Crew... <input type="checkbox"/> Always On Time <input type="checkbox"/> Usually On Time <input type="checkbox"/> Rarely On Time <input type="checkbox"/> Never On Time
Cleanliness Of Work Site During The Job <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor	Cleanliness Of Work Site After The Job <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor	Overall Quality Of Work Completed <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor	Do You Feel Your Property Was Treated With Proper Respect? <input type="checkbox"/> Yes <input type="checkbox"/> No
Were There Any Problems On The Job? <input type="checkbox"/> Yes <input type="checkbox"/> No	Did You Contact Us About The Problem? <input type="checkbox"/> Yes <input type="checkbox"/> No	Was The Problem Corrected To Your Satisfaction? <input type="checkbox"/> Yes <input type="checkbox"/> No	Will You Recommend Us To Friends & Family? <input type="checkbox"/> Yes <input type="checkbox"/> No

Did any of our workers provide you with exceptional service?  
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How can we improve our level of service in the future?  
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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for taking the time to help us serve you better in the future.