

Customer Service Report

- yes no Was our office staff helpful and courteous?
- yes no Were we on-time to your appointment?
- yes no Did you see the red carpet?
- yes no Was our technician neat, clean & courteous?
- yes no Does anyone in your home suffer from allergies?
- yes no Do you have to dust often?
- yes no Do you ever have a damp/musty odor in your home?
- yes no Would you like to receive a discount on today's call? (ask Technician)

Which rooms in the house are the least comfortable?

Is system noise objectionable?

What is your typical electric bill? *M/A* Summer _____ Winter _____
What is your typical gas/oil bill? Summer _____ Winter _____

What do you **NOT** like about your present heating and cooling system?

Additional comments:

Extremely Friendly! Informative ^{Very}

Please rate our service on a scale of 1 – 10 with 10 being the highest:

1 2 3 4 5 6 7 8 9 10

Chris
Email Address: _____

Name A. Combs

Address _____ Buff 10

Phone _____ 42716

Date: 6-5-14