

CUSTOMER FEEDBACK QUESTIONNAIRE

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Your feedback and suggestions are crucial in our efforts of continual improvement and achieving our ultimate goal of EXCELLENCE. We would greatly appreciate if you could complete the following questionnaire by indicating your level of satisfaction for each category below.

Kindly forward your completed response via e-mail using the following email address: services@factlabs.co.za

Cor	mpany Name					
Cor	mpany Representative Name					
Sigi	nature					
Dat	e					
			Excellent	Good	Fair	Poor
1.	Overall Satisfaction:					
	How satisfied are you with the overall service provided by our laboratory?					
2.	Quality of Results:					
	How would you rate the accuracy and reliability of the test results?					
3.	Timeliness in Microbial testing:					
	How satisfied are you with the turnaround time for receiving your test					
	results for microbiological analyses?					
4.	Timeliness in Chemistry testing:					
	How satisfied are you with the turnaround time for receiving your test					
_	results for chemistry related analyses?					
5.	. Client Support: How would you rate the clarity, effectiveness and responsiveness of our					
	communications with you, including requests for quotations and technical					
	support?					
6.	Affordability:					
0.	How would you rate the affordability and price competitiveness of our					
	services?					
7.	Correctness in reporting:					
	How do you rate the correctness of our reports?					
8.	Correctness in invoicing:					
	How do you rate the accuracy and correctness of our invoicing and					
	statements?					
	Kindly elaborate below, if you have indicate	ny of the q	uestions			
	Suggestions for improve	ement and/or comments				

Written by	Original Signed	Approved by	Original Signed	Copy no.
Original stamp	Original Stamped	Copy stamp		