Customer Satisfaction Survey Form

Organization Name :				
Criteria		**Description**	**Rating**	**Comments**
Enquiry / Response	1	Conversation		
	2	Correctness of information		
	3	Response to mail / Query		
	4	Quotation response		
Audit Process	1	Timely receipt of Audit plan /Schedule		
	2	Timely receipt of Audit Team Information		
	3	Punctuality of Audit Team reaching site on time		
	4	Quality of Audit conduct		
	5	Professional conduct of Auditors		
	6	Timely of Provision of Assessment reports		
	7	Correctness of Audit reports		
Post audit Process	1	Timely delivery of Certificate		
	2	Correctness of certificate		
Cost	1	Price Competitiveness		
	2	Correctness of invoice, Taxes etc.,		
Appeal / Complaint Handling	1	Acknowledgement on your complaints		
	2	Timely redress of complaints		
Over all Performance	1	Over all Response to queries at all stages of certification process		
	2	Overall Quality of service at all stages of certification process		
Assessed by (Name) :		Designation:		
Rating : 1 - Not Satisfied		2 - Satisfied ,	3 - Good	4 - Excellent

Please revert to info@q4am.com or **Q4A Management Private Limited**:

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