Car Service Satisfaction Survey

How to fill this in

Thank you for visiting our service center. Please rate your recent visit. Cross the checkboxes completely using a blue or black pen.

Vehicle make and model

Service date *(Please cross one in each line)*

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	19	20	21	22	23	24	25	26	27	28	29	30	31
Day	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
Month	○	○	○	○	○	○	○	○	○	○	○	○																		

YOUR SERVICE VISIT

Please rate your agreement with the following statements.

Please cross one in each line

	Strongly disagree	*Disagree*	*Neutral*	*Agree*	*Strongly agree*
Booking my appointment was easy	○	○	○	○	○
The work needed was explained clearly	○	○	○	○	○
My vehicle was ready when promised	○	○	○	○	○
The final price matched the estimate	○	○	○	○	○
The staff were courteous and professional	○	○	○	○	○
My vehicle was returned clean	○	○	○	○	○

OVERALL

How likely are you to recommend our service center?

Not likely ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ Very likely

Was your issue fully resolved? *(Please cross one)*

○ Yes
○ No
○ Partly

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To respond ⊗ or ●

DRFT 0001

How could we improve your next visit?

To respond ⊗ *or* ●

DRFT 0002