TRIPLE QUALITY PAINTING, INC.

FINAL EVALUATION

TRIPLE QUALITY PAINTING, Inc

CUSTOMER NAME: Willems WEEK OF EVALUATION: _____

ADDRESS: 17590 SHETland Ld CITY: lox HOME PHONE: 795-6724 CELL: _____

Triple Quality Painting Inc.

1. HOW WOULD YOU RATE OVERALL SATISFACTION WITH TQP PAINTING INC

	VERY HAPPY				POOR
	5	4	3	2	1

COMMENTS: _____

2. PLEASE RATE THE **PAINTER**: NAME: _____

	GOOD				POOR
• COURTEOUS AND KNOWLEDGABLE?	5	4	3	2	1
• HARDWORKING?	5	4	3	2	1
• NEAT AND ORDERLY?	5	4	3	2	1
• FOLLOWED SCOPE OF WORK?	5	4	3	2	1
• CLEANED UP UPON COMPLETION?	5	4	3	2	1

COMMENTS: _____

3. PLEASE RATE YOUR **SUPERINTENDENT**: NAME: _____

	GOOD				POOR
• SITE VISITS ON DAILY BASIS?	5	4	3	2	1
• FOLLOWS UP WITH OWNERS?	5	4	3	2	1
• MAINTAINED A SMOOTH JOBSITE?	5	4	3	2	1
• FINISHED JOB IN A TIMELY MANNER	5	4	3	2	1
• HOW MANY SITE VISITS THIS WEEK?	5	4	3	2	1

COMMENTS: _____

4. PLEASE RATE YOUR **SALESMAN**: NAME: _____

	GOOD				POOR
RETURNED YOUR CALLS PROMPTLY?	5	4	3	2	1
ANSWERED QUESTIONS/ADDRESSED CONCERNS?	5	4	3	2	1
POLITE, KNOWLEDGABLE?	5	4	3	2	1
HOW MANY SITE VISITS THIS WEEK?	5	4	3	2	1

WOULD YOU USE TQP PAINTING, INC IN THE FUTURE? **YES** **NO**

BY SIGNING THIS DOCUMENT YOU HEREBY ACKNOWLEDGE YOU HAVE SEEN AND EVALUATED ALL THE WORK COMPLETED TO DATE.

Client Signature: _____ **Print Name:** Ralph Willems

Title: _____ **Date:** 7/9/14

"40 YEARS IN BUSINESS"

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