

SERVICE EVALUATION

Customer Name:

National Account:

Move Date:

Origin City/State:

Destination City/State:

Please rate our performance from the following scale:

RATING SCALE: 5=EXCELLENT 4=GOOD 3=SATISFACTORY 2=POOR 1=UNACCEPTABLE

Circle the number that correlates best to each aspect of your move.

- | | | | | | |
|------------------------------------------------------------------|---|-----|----|---|---|
| 1. How would you rate your move coordinator? | 5 | 4 | 3 | 2 | 1 |
| 2. How would you rate your pre-move surveyor? | 5 | 4 | 3 | 2 | 1 |
| 3. Did your driver & crew(s) arrive on time each day? | | Yes | No | | |
| 4. Was your driver & crew(s) in uniform each day? | | Yes | No | | |
| 5. How would you rate the packing process? | 5 | 4 | 3 | 2 | 1 |
| 6. How would you rate the loading process? | 5 | 4 | 3 | 2 | 1 |
| 7. How would you rate the unloading/unpacking process? | 5 | 4 | 3 | 2 | 1 |
| 8. Overall, how would you rate your driver? | 5 | 4 | 3 | 2 | 1 |
| 9. Did you experience any loss or damage during the move? | | Yes | No | | |
| 10. What is your overall rating of the move? | 5 | 4 | 3 | 2 | 1 |
| 11. Would you use our services again? | | Yes | No | | |

Additional Comments: _____

Thank you for allowing us to continue providing quality relocation services.

Customer Signature

Date

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