

## **Afast Movers**

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## **CUSTOMER ASSESSMENT REPORT**

Thank you for entrusting your move to Afast Movers. We will be grateful, if you could spend some time to fill out this report to enable us to further improve our services.

Name of Customer:		
Address:		
Shipment to :		
Date of commencement of job :		
Were the crew on time in their daily execution of job?	O Yes	○ No
Were the crew courteous, helpful and efficient?	O Yes	○ No
Were the Administration staff helpful?	O Yes	○ No
Were you guided in filling up the necessary documents for export/import?	○ Yes	○ No
Were the shipment particulars informed to you?	O Yes	○ No
Were you satisfied with the origin/destination services?	O Yes	○ No
Would you recommend your friends to use us?	O Yes	○ No

Please use the following space for any general comments or suggestion you have that will enable us to improve our service.		
Signature :	Date (dd/mm/yy) :	
Thank you for your precious time.		
Reset Form	Print This Page	