



Client Feedback Form

Doc No. BH-IMS-F-022

Revision No. 1

Send completed form to:

sales@brookshire.com.au

Name:
Position:
Company:
Project:
Email Address:
Phone No.:

The questions below concern the services Brooks Hire have provided you. As part of our quality procedure to improve our overall relationship and better serve you and our future clients, we are asking you to candidly answer these questions. Thank you in advance from Brooks Hire.

Questionnaire

1. How do you rate our service overall?	<input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent
2. How do you rate the level of knowledge and expertise of Brooks Hire staff?	<input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent
3. Were Brooks Hire staff available and accessible to help with any queries or concerns?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. How would you rate the level of accessibility?	<input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent <input type="checkbox"/> N/A
5. Did Brooks Hire meet the agreed deadline?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Was the quality of the work to a high standard?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Did Brooks Hire staff listen and provide responsive & helpful advice?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
8. Has the service provided added value to your business?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Did the work meet your expectations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Would you recommend our services?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please provide a brief statement on the service you were provided by Brooks Hire.

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Name:

Signature:

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