








Fax No.:	Form No. : NT/QSC/FORM-001
03-5122 8766/7 (Shah Alam)	Revision No. : 1
03-5124 8767 (Metrology)	Effective Date : 2014
03-5121 8767 (Nusatest)	CUSTOMER SATISFACTION SURVEY

Name : _____ Designation : _____
 Company : _____ Contact No. : _____
 Division : _____ Date : _____

Dear Sir/Madam,
 We would be grateful if you could evaluate us on the criteria below by indicating the value in the Division Rating box to help us improve our services. Please note that the evaluation rating is as follows:

 (Poor)	 (Below Average)	 (Average)	 (Good)	 (Excellent)					
1	2	3	4	5	6	7	8	9	10

No.	Evaluation on TECHNICAL SERVICES	Division Rating		
		Material	Metrology	NDT
1.	Scope of services provided by our laboratory			
2.	Staff are friendly and courteous			
3.	Staff are dressed representatively			
4.	Staff are punctual and well-prepared			
5.	Staff are competent, skillful and knowledgeable			
6.	Quality of testing/calibration sample preparation			
7.	Quality of testing/calibration being performed			
8.	The turnaround time upon completion of testing/calibration			
9.	The turnaround time on completion of testing/calibration report			
10.	The quality of the testing/calibration report produced			
11.	Respond time towards customer complaints or enquiries			
12.	Condition and environment of our laboratories/workplace			
No.	Evaluation on SUPPORT SERVICES (where applicable)	Sales & Marketing	Finance & Admin.	QSC
1.	Direction to our premises			
2.	Staff are friendly and courteous			
3.	Staff are knowledgeable about their work/task			
4.	The turnaround time upon completion of their work/task			
5.	Respond time towards customer complaints or enquiries			
6.	Facilities provided in our premises			

Do you have any other comments to improve further?
 1. _____
 2. _____
 3. _____
 4. _____

Evaluated by: _____

 (Please stamp and sign)

Submit to info@nusatek.com

We would like to take this opportunity to thank you for choosing Nusantara Technologies Sdn. Bhd. services and your valuable time in completing these questionnaires. We sincerely hope that the results of this survey will enable us to provide you better services.

Received by : _____ Date : _____
 (Please stamp, sign and return this to QSC Division)