

Customer Satisfaction Survey

Company Name: _____

Date: _____

Please rate the following:	<i>Excellent</i>					<i>Poor</i>
	6	5	4	3	2	1
Quality of product delivered						
Turn-around time						
How well product conformed to specifications						
Responsiveness to requests						
Ease of communication with EMP employees						

	<i>Very Likely</i>				<i>Unlikely</i>	
How likely is it that you will place an order with us in the future?						
How likely is it that you would recommend us to others?						

General comments, suggestions, concerns (optional):

Your Name (optional): _____

Your Email (optional): _____

Please email your completed survey to feedback@engmet.com or fax to 262-677-1888