|  |
| --- |
| **CUSTOMER FEEDBACK FORM** |
| **Name of Person:** |  |
| **Contact Number:** |  |
| **Address:** |  |
| **Organization:**  |  |
| **Date:** |  |

1. How would you rate your overall experience with our service?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Very Good | Good | Fair | Poor | Very Poor |

1. How would you rate our charges/prices?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Very Good | Good | Fair | Poor | Very Poor |

1. How satisfied are you with the timeliness of order delivery?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Definitely | Probably | Not Sure | Probably Not | Definitely Not |

1. How satisfied are you with the customer support?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Definitely | Probably | Not Sure | Probably Not | Definitely Not |

1. Would you recommend our product/service to other people?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Definitely | Probably | Not Sure | Probably Not | Definitely Not |

1. How satisfied are you with the quality of our product/service?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Definitely | Probably | Not Sure | Probably Not | Definitely Not |

1. What should we change/improvise/implement in order to live up to your expectations?
2. Overall Comments :

Thank you for your valuable feedback! We value all of our customers and strive to meet everyone’s needs.

**Contact Information:**

Head, Sales & Marketing Unit Contact No. 00975-17318385

Email: smofficer@bhsl.bt

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| --- | --- | --- | --- | --- |
| **Rev. No.** | **Revision Date** | **Details** | **Reviewed by** | **Approved By** |
| 01 | 17/01/2018 | Initial Issue | Bijay Kumar Rai | Thinley Dorji |
| 02 | 21/01/2020 | Included date of receipt of feedback | Bijay Kumar Rai | Pelden Drukpa |
| 03 | 13/04/2023 | Included date of receipt of feedback | Kuenzang Thinley | Pema Wangda |