INSURANCE BROKERS
WAUMINI
KEEPERS OF YOUR PRECIOUS WORLD

# CUSTOMER FEEDBACK FORM

Dear Customer, thank you for choosing Waumini Insurance Brokers .Your feedback will help us serve you better and enable us work on improving our service.

**A) Customer Information**

| | |
|---|---|
| Customer Name | |
| Telephone Number | |
| Email | |

B) This feedback is a **Suggestion** □ **Compliment** □ **Complaint** □

C) Would you use our services again? **Yes** □ **Maybe** □ **No** □

D) Did you find our staff helpful**?** **Yes** □ **Maybe** □ **No** □

E) How did we provide the service?

**Walk in** □ **Phone** □ **Website** □ **Letter** □ **Email** □ **Other** □

F) When did we provide the service?

Date of service:…… Time……

G) How would you like us to improve our services?

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