



Dear Mrs Mrs. J. Dainton Order Ref: Dainton 1693 Date:

As a long established local company we are keen to continually improve our service by learning from our customers. We would appreciate it if you would help us by answering a few brief questions based on your recent experience. Please tick the boxes under the appropriate headings to indicate your response to each question.

Showroom experience

Excellent Good Average Poor Disappointing

What was your impression of our showroom?

Grid of checkboxes for showroom impression, with 'Excellent' checked.

How would you describe our showroom staff?

Grid of checkboxes for showroom staff, with 'Excellent' checked.

What was the most impressive aspect of your showroom experience?

THE WELCOME & DEPTH OF KNOWLEDGE

How do you feel we could improve this experience?

Horizontal line for additional comments.

Designer experience

Excellent Good Average Poor Disappointing

How effective were we in understanding and interpreting your requirements correctly?

Grid of checkboxes for designer understanding, with 'Excellent' checked.

To what standard were the plans and visuals presented to you?

Grid of checkboxes for plan/visual standard, with 'Excellent' checked.

Additional comments

Horizontal line for additional comments.

Technical Survey & Paperwork

Excellent Good Average Poor Disappointing

How did you find the pre-installation survey?

Grid of checkboxes for pre-installation survey, with 'Excellent' checked.

How clear and thorough was our paperwork?

Grid of checkboxes for paperwork clarity, with 'Excellent' checked.

Additional comments

Horizontal line for additional comments.

PLEASE TURN OVER

**Installation**

How would you describe the standard of installation work?

Excellent	Good	Average	Poor	Disappointing
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How would you describe the overall level of service provided by the fitters?

Excellent	Good	Average	Poor	Disappointing
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional comments ALWAYS ON TIME & CONSIDERATE

**Overall**

How would you rate our service and your experience?

Excellent	Very Good	Good	Average	Poor	Very Poor	Disappointing
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Would you recommend our services?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Please describe your overall impression of our service

FROM BEGINNING TO END, VERY PROFESSIONAL & ACCOMODATING, ANY SNAGS RECTIFIED WITHOUT ANY FUSS, AND NOW WE HAVE A BEAUTIFUL KITCHEN. THANKS TO ALL CONCERNED & INVOLVED IN THE END RESULT.

**Many thanks for completing our survey; your feedback is very much appreciated.**

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