

CUSTOMER SURVEY

Thank you for taking the time to complete this survey. Your responses will help us improve our services and quality for you, our customer.

Once completed, just fold, tape closed, and drop in the mail.

Thanks again for your participation,

Martin Bruner

Location:

Lite Touch Auto Wash:

- 1635 Fort Campbell Boulevard
(931) 551-4797
- 2640 Wilma Rudolph Boulevard
(931) 645-9409
- 1875 Madison Street
(931) 542-0573

Date Service Received: _____

Service Received:

- Car Wash Amount Paid: _____
- Detail Service Amount Paid: _____
- Other _____

Car Wash Receipt # _____

Personnel:

1. Were you greeted promptly?
 Yes No
2. Were you greeted politely?
 Yes No
3. Was the cashier prompt?
 Yes No
4. Was the cashier courteous?
 Yes No
5. Were employees dressed in uniform?
 Yes No
6. Were employees dressed neatly?
 Yes No
6. Did you see the manager?
 Yes No
7. Did the employee appear enthusiastic about their work?
 Yes No
8. Did the personnel appear to appreciate your business?
 Yes No
9. Did you feel comfortable with the individual working on your vehicle?
 Yes No
10. Did the personnel appear knowledgeable about the services you received?
 Yes No

Quality of Service:

Please rate the quality of the service received:
(1 being lowest - 10 being highest)

Vacuum

1 2 3 4 5 6 7 8 9 10 N/A

Tires Dressed

1 2 3 4 5 6 7 8 9 10 N/A

Windows Cleaned

1 2 3 4 5 6 7 8 9 10 N/A

Dash Wiped

1 2 3 4 5 6 7 8 9 10 N/A

Auto Body

1 2 3 4 5 6 7 8 9 10 N/A



Overall Evaluation:

11. Cleanliness of Facility

1	2	3	4	5	6	7	8	9	10	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Cleanliness of Shop Floor

1	2	3	4	5	6	7	8	9	10	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Cleanliness of Vacuum Areas

1	2	3	4	5	6	7	8	9	10	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. Cleanliness of Restrooms

1	2	3	4	5	6	7	8	9	10	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. Was the service performed in a timely manner?

Yes No

16. Will you return to this location for future services?

Yes No

17. Was this your first visit to this location?

Yes No

18. Overall, how satisfied were you for having come to this location?

1	2	3	4	5	6	7	8	9	10
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Will you recommend this business to a friend?

Yes No

Do you have any recommendations for areas of improvement? _____

Please list additional services you would like to see us offer: _____

BRUNER ENTERPRISES
P.O. Box 402
Clarksville, TN 37041

**1875 Madison St.
931-542-0573**

**1635 Ft. Campbell Blvd.
931-551-4797**

**2640 Wilma Rudolph Blvd.
931-645-9409**



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