

## **STAR TEST LABORATORY**

## **CUSTOMER SATISFACTION QUESTIONNAIRE FORM**

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Dear Customer,

As Star Test Laboratory, we take your comments and opinions into consideration in order to continuously improve and develop the service quality we provide. In order to serve you better and to respond to your expectations faster, we kindly ask you to fill out the Customer Satisfaction Questionnaire and send it to us.

| Company Name                   | : |             |
|--------------------------------|---|-------------|
| Contact Person<br>Name&Surname | : | Date :      |
| Telephone and ve<br>E-mail     | : | Signature : |

| QUESTIONS   | Strongly<br>Disagree<br>(1) | Disagree<br>(2) | Neither<br>Agree Nor<br>Disagree<br>(3) | Agree<br>(4) | Strongly<br>Agree<br>(5) |
|---|-----------------------------|-----------------|---|--------------|--------------------------|
| Star Test Lab is reliable and informative.                          | ( )                         | ( )             | ( )                                     | ( )          | ( )                      |
| Sample Acceptance processes are carried out at sufficient speed.    | ( )                         | ( )             | ( )                                     | ( )          | ( )                      |
| It is easy to communicate with Star Test Laboratory.                | ( )                         | ( )             | ( )                                     | ( )          | ( )                      |
| Test reports are sent within the specified times.                   | ( )                         | ( )             | ( )                                     | ( )          | ( )                      |
| The Test Report contains understandable and sufficient information. | ( )                         | ( )             | ( )                                     | ( )          | ( )                      |
| Scope of Tests can meet our needs.                                  | ( )                         | ( )             | ( )                                     | ( )          | ( )                      |
| Billing is done accurately and on time.                             | ( )                         | ( )             | ( )                                     | ( )          | ( )                      |
| I always want to benefit from laboratory services.                  | ( )                         | ( )             | ( )                                     | ( )          | ( )                      |

Additional Information

Please send it to us by post or e-mail after completing the form.

Tel: 0212 438 12 79

E-mail: info@startestlab.com

Address: Oruçreis Mah. Giyimkent 14. Sokak No: 70/A 34235 Esenler/ Istanbul/ TURKEY