



CL-DEE
Department of Energy and Environment
National Institute of Technology
Tiruchirappalli-620015



CUSTOMER FEED BACK FORM

1. NAME OF ORGANIZATION:
2. ADDRESS:

3. CONTACT NO:
4. CALIBRATION NO:

CALIBRATION DATED:

| Si No | Contents | Feed Back(Please Tick any one) | | | | |
|----------------------|---|--------------------------------|--------|------|------|-------|
| | | E (10) | VG (8) | G(6) | F(4) | NI(2) |
| 1. | Availability of information regarding calibration service (2) | | | | | |
| 2. | Response to the Query (2) | | | | | |
| 3. | Attention & Services (1) | | | | | |
| 4. | On time completion of Calibration work (2) | | | | | |
| 5. | Delivery of Calibration report (1) | | | | | |
| 6. | Safeguarding of DuC (1) | | | | | |
| 7. | Receptiveness to complaints & suggestion (1) | | | | | |
| Suggestion (if any): | | | | | | |

Date:

Signature of Customer



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