## [Company name]

How to use this document: delete this paragraph before saving, sharing, or circulating it. Every part shown in blue is yours to replace: type your own details over each blue [field] until no blue remains. Add or remove table rows to fit your needs. Then select all (Ctrl+A) and set the font colour to the same dark colour throughout. What is left is your finished document.

# Auto repair garage customer feedback form

| | |
|---|---|
| **Date of work** | [Date] |
| **Vehicle reg** | [Reg no.] |

## Your experience

| Question | Answer / rating |
|---|---|
| How was the quality of the work? (1–5) | |
| Was everything explained clearly? (1–5) | |
| Was the work completed on time? (1–5) | |
| Was the pricing transparent? (1–5) | |
| How would you rate the overall experience? (1–5) | |
| Would you recommend us to others? | |

## Comments

[Anything else you would like to tell us]

## Contact (optional)

| | |
|---|---|
| **Phone** | [Phone] |
| **Email** | [Email] |