

Dear valued customer,

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CUSTOMER SATISFACTION ASSESSMENT FORM

achieve this measure yo	utmost priority is to supply high q goal by sparing a few minutes of ur satisfaction, and returning to u ozakgaz.com.tr), by fax (+90 324	f your valuable ti	me in complet convenience	eting this form, e. You may ret	which is designed to urn the form by e-
Name and model of ÖZAK product you have: Ozak Nilstogen generately Since when you are using it : September, 2817					
Please rate us from 0 to 10 on the topics below (you may add comments if needed)					
GENERAL					
• Rea	aching the person you want to		:	10	-
 Atte 	Attention and willingness of our personnel :				
• Cor	npleteness of information and qu	otations supplied	d :	10	
 Deli 	very of product on time		:	10	
PRODUCT					
 Reli 	ability	:	10		
• Eas	e of use	:	10		
• Doo	umentation	:	10		
• Ger	neral quality	:	10		
AFTER SALE SERVİCE:					
• Red	eption on telephone	: <u>-</u>	01		
• Tim	eliness of service	:	10		
 Attit 	ude of service personnel	:	10	3.322	
• Trai	ning given to your personnel	:	10		
YOUR COMMENTS AND SUGGESTIONS: Mr. Yakup Colkesen has					
assisted me 100% in the installation and					
listing of vitrogen generator.					
autout asage of gard could be provided with					
more better arrality proing system so that it is					
directly connected to other shackines.					
DATA OF PERSON WHO FILLED THE FORM					
Company	Reck tradus	ith.	Position	Bales	Exemply
	 	Andrew American			

Rudhi Arus ng. M Signature fendly