

Origin Feed Back Report



(An ISO 9001:2008 Certified Company)



Date: 10/08/2017

Job No: NR-1495

Dear Sir/Madam,

We at MAXWELL believe that every relocation is different and unique. To help us improve our service and serve you better, may we request you to please take a few moments of your time to complete and return this form to us. We would like to hear from you even if you don't have a complaint. Maybe you have a suggestion that will help us to improve our service level.

Name: PRERNA TEOTIA

Address: RZ-32, PREM NAGAR, PH-2, NATAFGARH, NEW DELHI - 43

Phone Nos.: (M) 9581645810 Email: Prema.testia@gmail.com

Company Name: MYNTRA Designation: SR. MERCHANDISING OFFICER

Origin: NEW DELHI Destination: BANGLORE

Supervised by: SUNIL JHA

Origin Service:

(Please tick the appropriate box)

	EXCELLENT	GOOD	FAIR	POOR
Did the surveyor give you a feeling of comfort and adequate information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the crew courteous well presented & capable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the packing done to your satisfaction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How good were be at keeping the agreed time.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How would you rate the origin service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMMENTS: Service is excellent & recommendable.

Kiran
(SIGNATURE)

Questionnaire Form

Proud Member  International Association of Movers



Full Name: PRERNA TEOTIA NR-1495

Date of Birth 10 / 08 / 1994 Date of Anniversary / /

Origin Address: RZ-32, PREM NAGAR, Ph-2, NAJAFGARH
NEW DELHI - 43

Telephone Nos: (O) 8447855680 (R) 9910692891 (M) 9581645810

Email Id: (Official) prerna.teotia@gmail.com
(Personal)

Date of Departure: 10/08/2017

Airline/Flight Number:

Passport No. & Date:

Name of Company/Account: MYNTRA

Designation: SR. MERCHANDISING OFFICER

Mode (Surface/Air/Sea):

Do You Require Storage at Origin? if Yes, How Long

Do You Require Storage at Destination? if Yes, How Long

Do You Require Insurance? if Yes, Please Complete The Valuation Form

Contact/Delivery Address at Destination: 21, 20th Cross, 27th Main, HSR LAYOUT
SECTOR-2, BANGLORE

Telephone Nos: (O) 9581645810 (R) 9910692891 (M) 9581645810

Payment Will Be Made By:

I hereby, confirm that the details given above is true and correct to the best of my knowledge. I also authorise you to send me the promotional mail or send me the photographs on my official/ personal/ facebook/ other mail id.

DATE 10/08/2017


(SIGNATURE)