





| | | | JOD NO: | | ••••• |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------|--------------|-----------------|-------|
| Dear Sir/Madam, | | | | | |
| We at MAXWELL believe that every relocated serve you better, may we request you to please take us. We would like to hear from you even if you don't to improve our service level. | a few moments of you | ir time to con | nplete and r | eturn this forr | n to |
| Name: Ashul Mayer | | | | 0.0 | |
| Address: 73, 219 Usali | Jeeran A | partme | ut, | | |
| Sadushiv Nagar | Bengalw | zu. | | | |
| Phone Nos.: (M) . 886 | | / / | | | |
| Company Name Reliance Jis Infocom | mld Designation: | Manage | 1-CS | <u> </u> | |
| Origin Bangalore | Destination: | New | Delh | e ^r | |
| Supervised by: Kuna | <i>l</i> | | | | |
| Origin Service: (Please tick the appropriate box) | EXCELLENT | GOOD | FAIR | POOR | |
| Did the surveyor give you a feeling of comfort and adequate information. | | | | | |
| Was the crew courteous well presented & capable. | | | | | |
| Was the packing done to your satisfaction. | | | | | |
| How good were be at keeping the agreed time. | | | | | |
| How would you rate the origin service. | 4 | | | | |
| COMMENTS: Jantathe worth o | dere by the | u Jean | ^ · | | |
| <u></u> | U . | | | ·/ | 10. |
| | | | | 1114 | Jes - |
| | | | , X | (SIGNATU | RE) |







| Full Name: ASUCH Nayor |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date of Birth 10 / 12 / 1978 U Date of Anniversary |
| Origin Address: 7B1 219 Sah Jeevan Apartneat Baugelove |
| |
| Telephone Nos: (O) |
| Email Id: (Official) ashish nayar @ ril com |
| (Personal) ashish N78 @ quail com. |
| Date of Departure: 22/9/17 |
| Airline/Flight Number: |
| Passport No. & Date: |
| Name of Company/Account: Reliquiee Tio Taxocomm ttd. |
| Designation: Managel - Corposate Sempice |
| Designation: Manager - Corposate Semvice. Mode (Surface/Air/Sea: Senface. |
| Do You Require Storage at Origin? if Yes , How Long |
| Do You Require Storage at Destination? if Yes, How Long |
| Do You Require Insurance? Yes,/No |
| Contact/Delivery Address at Destination: E-335 Greater Kailesh One |
| New Delhi -1/0048 |
| Telephone Nos: (O) |
| Payment Will Be Made By: Lef |
| 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. |
| MAR |