

Water Wizards Irrigation, LLC

Post Installation/Service Quality Survey

Customer Name: _____

Date of Installation/Service: _____

Town of Installation/Service _____

Residence or Commercial: _____

1	Poor
2	Fair
3	Good
4	Very Good
5	Excellent

For each item identified below, circle the number to the right that best fits your judgment of its quality. Use the scale above to select the quality number.

Description / Identification of Survey Item	Scale / Circle One				
	1	2	3	4	5
1. Were you satisfied with the irrigation products installed?	1	2	3	4	5
2. Was the system design explained thoroughly?	1	2	3	4	5
3. Was your sprinkler system installed in a timely manner?	1	2	3	4	5
4. Were you satisfied with the workers conduct?	1	2	3	4	5
5. Did the installation start on time?	1	2	3	4	5
6. Was your yard cleaned and raked after installation?	1	2	3	4	5
7. Was the wiring in your home neat and clean?	1	2	3	4	5
8. Were you satisfied with the quality of craftsmanship?	1	2	3	4	5
9. Were you satisfied with your overall experience?	1	2	3	4	5
10. May Water Wizards use you as a reference?	YES		OR	NO	
11. Would you recommend Water Wizards to a friend?	YES		OR	NO	
12. Did you find www.waterwizardsllc.com easy to use?	1	2	3	4	5

Additional Comments:

Signed / Acknowledged: _____ Date: _____