



West Tennessee Restoration

FIRE * WIND * WATER

Quality Assurance Interview Form

Contractor Name: West Tennessee Restoration	Insured Name: David Emerson
Date of Loss: 11-20-2007	Claim No.:
Estimator: John Byrum	Insurance Co.: Farm Bureau

1. Have you experienced any problems to date?

N
Y/N

Comments: _____

2. Has our staff been courteous, polite and helpful?

~~N~~

3. Has our staff been on time to scheduled appointments?

~~N~~

4. Do you feel we have sufficiently communicated to and kept you informed about the restoration process, scheduling, and what to expect?

~~N~~

5. Has the job site been organized and clean?

~~N~~

6. On a scale of 1 - 5, 1 being the poorest and 5 being the best, what would you rate the quality of the work performed?

5

7. Are there any suggestions you could give to us that would improve our services?

a. None

b. _____

8. Is there any additional feedback you could provide us, or follow up you would like me to perform? ~~Y/N~~ N

COMMENTS: done A Good Job