



Quality Assurance Interview Form

Contractor Name: West Tennessee Restoration	Insured Name: Don McLeary
Date of Loss: 2-25-08	Claim No.: HTW 4972420
Estimator: David McWay	Insurance Co.: State Auto

1. Have you experienced any problems to date?

YES

Comments: _____

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

Y/N

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

Y/N

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

Y/N

5. Has the job site been organized and clean?

Y/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. No
- b. _____

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

COMMENTS: Good job. Thanks for
your professional way of
doing business. Don McLeary