



Certificate of Satisfaction: Job Completion

Customer Name: HELGA BROCK Date of Loss: 2024-02-28

Loss Address: 6601 Monnell Dr., Raleigh, NC 27617

City: _____ State: _____ Zip: _____

Team Members: _____ Claim Number (if available): _____

SERVPRO® and its Franchisees strive to be the Premier Cleaning and Restoration Company.
Please take a moment to complete the following questionnaire and help us evaluate how we're doing.

On a scale of 1 to 10, with 1 being "Strongly Disagree" and 10 being "Strongly Agree," how would you rate the following:

- | | Strongly
Disagree | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | Strongly
Agree |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|
| 1. The SERVPRO® Franchise's office staff was courteous, polite and helpful throughout the duration of the job. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ |
| 2. The SERVPRO® Franchise's on-site personnel were prompt, courteous and attentive to my concerns. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ |
| 3. The SERVPRO® Franchise's on-site personnel clearly explained the cleaning and restoration process throughout the duration of the job. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ |
| 4. I was confident in the knowledge and professionalism of the SERVPRO® Franchise's on-site personnel who performed the services at my home or place of business. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ |
| 5. I was impressed by the SERVPRO® Franchise's on-site personnel that performed services at my residence or place of business. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ |
| 6. I would use the SERVPRO® Franchise who assisted me during this loss for future cleaning and/or restoration needs. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ |
| 7. I would recommend the SERVPRO® Franchise to my friends, family and colleagues. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ |
| 8. Overall, I am satisfied with the service(s) provided by the Servpro® Franchise. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ |
| 9. What recommendations would you have to help the SERVPRO Franchise improve its performance in the future? | | | | | | | | | | | |
| 10. Additional Comments: | | | | | | | | | | | |

Customer, HELGA BROCK, acknowledges that the restoration / cleaning project for which the SERVPRO® Franchise has provided Emergency Services has been performed to the customer's satisfaction.

Signature: Helga Brock Date: 2024-03-14

Thank you for your feedback. We appreciate your patronage and look forward to serving your future cleaning and restoration needs.

Signature Certificate

Reference number: C5W7A-HH7HP-4S2UW-ATPU2

Signer

Timestamp

Signature

Helga Brock

Email: hgbrockncsuedu@gmail.com

Sent:

13 Mar 2024 15:22:01 UTC

Viewed:

14 Mar 2024 22:02:37 UTC

Signed:

14 Mar 2024 22:06:27 UTC



Recipient Verification:

✓ Email verified

14 Mar 2024 22:02:37 UTC

IP address: 136.54.116.25

Location: Raleigh, United States

Document completed by all parties on:

14 Mar 2024 22:06:27 UTC

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