



MAXgreen JOB COMPLETION FORM

Customer Name: John Babin
 Address: 7360 Huntley RD NE
 Phone #: 587 707 2753
 Charity of Choice: _____

Project Completion Date: May 7 2017
 Project Consultant: _____
 Lead Installer: Wes

Any outstanding issues to rectify? No

Please rate the following on a scale of 1 (poor) to 10 (excellent), or N/A if not applicable:

Punctuality of the Consultant	<u>10</u>	Friendliness of the Installers	<u>10</u>
Responsiveness to Your Questions	<u>10</u>	Cleanliness of the Installers	<u>10</u>
Overall Experience with the Consultant	<u>10</u>	Overall Installation Quality	<u>10</u>
Overall Quality of the Windows/Doors	<u>10</u>	Overall Experience with Installers	<u>10</u>
Punctuality of the Installers	<u>10</u>	Overall Satisfaction with MAXgreen	<u>10</u>

Would you recommend MAXgreen to your friends and family? Yes / No
 May we share your comments / feedback with other potential customers? Yes / No
 May we use your name and phone number as a reference for other customers? Yes / No
 If no, may we use only your name and comments for testimonials? Yes / No / N/A

Comments / Feedback. If we didn't earn perfect 10s, what could we have done better?
Professional work + service. Thanks for a great job

(please use back of page if more room is required).

Lead Installer:
[Signature]
 (Signature)
Wes Nickel
 (Print Name)

Homeowner:
[Signature]
 (Signature)
John Babin
 (Print Name)