

Post-Repair Resident Satisfaction Survey Form

Thank you for taking the time to complete this survey. Your feedback helps us maintain high standards of service for all residents. Please fill out this form and return it to the management office.

1. Resident and Repair Information

Resident Name:

Apartment / Unit Number:

Phone Number:

Date of Repair:

Work Order Number (if known):

Description of Repair/Maintenance Completed:

2. Service Evaluation

Please rate your satisfaction with the following aspects of your repair service. (Write a number from 1 to 5, where 1 is Very Dissatisfied and 5 is Very Satisfied)

How satisfied are you with the speed of response to your repair request? (1-5):

How satisfied are you with the communication regarding when the repair would occur? (1-5):

How satisfied are you with the professionalism and courtesy of the repair technician? (1-5):

How satisfied are you with the quality of the completed repair work? (1-5):

How satisfied are you with the cleanliness of the work area after the repair was completed? (1-5):

Overall, how satisfied are you with the entire repair process? (1-5):

3. Yes / No Questions

Was the repair completed on the first visit? (Write Yes or No):

Did the technician wear shoe covers or take precautions to protect your home? (Write Yes or No):

4. Additional Comments

Please share any additional comments, compliments, or suggestions for improvement:

Resident Signature: Date: