

E-commerce Delivery Service Evaluation Survey

Please complete this evaluation survey regarding your recent delivery experience. This printed form will be used to improve our services.

1. Customer & Order Details

Customer Name:

Order Reference Number:

Date of Delivery:

Delivery Address:

2. Delivery Performance & Timeliness

Was your package delivered within the estimated time frame? (Yes / No / Delayed):

If your delivery was delayed, by how many days or hours?

How would you rate the speed of delivery? (Excellent / Good / Fair / Poor):

3. Package Condition & Accuracy

Was the external shipping box undamaged? (Yes / No):

Were the items inside undamaged and intact? (Yes / No):

Were all the ordered items included in the delivery? (Yes / No):

4. Courier & Delivery Agent Behavior

Was the delivery personnel polite and professional? (Yes / No):

Did the courier follow your specific delivery instructions? (Yes / No / Not Applicable):

Was appropriate safety and contact-free delivery maintained? (Yes / No):

5. Overall Satisfaction

Overall rating of our delivery service (Scale of 1 to 10, with 10 being best):

What did you like most about this delivery service?

What areas of our delivery service can we improve?

