



MAXgreen JOB COMPLETION FORM

Customer Name: Chris Frey
 Address: 340 Falshire Dr NE
 Phone #: 403 708 5432
 Charity of Choice: Heart and stroke

Project Completion Date: Jan 24 2017
 Project Consultant: _____
 Lead Installer: _____

Any outstanding issues to rectify? Replace weatherstrip at back door.

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

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

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?
Great work, thanks for the new great doors!

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

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

Homeowner:
[Signature]
 (Signature)
Chris Frey
 (Print Name)