



SVS, INC.

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At SVS, Inc., our main objective is our dealer satisfaction and your feedback is vital to assist us in meeting your expectations. Would you please help us keep on improving by telling us how we are doing? Thank you for taking a few minutes to complete this form and returning it to SVS, Inc. at Fax: 001-303-794-2546?

How was your purchasing experience?

- Customer Service Assistance and Availability Very Good ___ Good ___ Fair ___ Poor ___
- Knowledge of SVS Products and Services Very Good ___ Good ___ Fair ___ Poor ___
- Ease of Placing an Order Very Good ___ Good ___ Fair ___ Poor ___
- The Order Cycle Very Good ___ Good ___ Fair ___ Poor ___
(from Order Placement to Delivery)

How was the installation?

- Product Package and Markings for easy identification, placement and installation Very Good ___ Good ___ Fair ___ Poor ___
- Ease of Lift installation Very Good ___ Good ___ Fair ___ Poor ___
- Install Manuals- Ease of Understanding Very Good ___ Good ___ Fair ___ Poor ___
- Factory Technical Support Very Good ___ Good ___ Fair ___ Poor ___
- Product Performance to Specifications Very Good ___ Good ___ Fair ___ Poor ___
- Product Appearance Very Good ___ Good ___ Fair ___ Poor ___

What do you think of SVS lifts?

- The reliability of SVS Lifts Very Good ___ Good ___ Fair ___ Poor ___
- The Maintainability of SVS Lifts Very Good ___ Good ___ Fair ___ Poor ___
- The ease of Use of SVS Lifts Very Good ___ Good ___ Fair ___ Poor ___
- The Integration of SVS lifts to external controller Very Good ___ Good ___ Fair ___ Poor ___

What one thing would you change about SVS Lifts to improve our overall performance?

Are there any products you would like to see SVS Lifts provide in the future?

Your Information:

Company Name: _____

Contact Name: _____ **Title:** _____

Address: _____

City, State, Zip, Country: _____

THANK YOU FOR YOUR SUPPORT!