**Customer Questionnaire**

Purpose: The purpose of the customer questionnaire is to assist Facilities Solutions to focus on high priority concerns. Your answers are appreciated and confidential!

1. Who in your organization is responsible for employee and building related services? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you have a Janitorial contract? Yes/No
	1. Who is the contractor? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. From 1-10 with 10 being the most satisfied are you satisfied with your service and cleanliness of your facility? \_\_\_\_\_\_\_
3. Are your operations regulated by ISO, GMP or other compliance requirements? \_\_\_\_\_\_
4. Do you have a Pest Control program? Yes/No
	1. If so who is the contractor? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Will your organization be growing in the next year? Yes/No

Current Growth

* 1. Laboratories sqft: \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_
	2. Clean rooms sqft: \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_
	3. Office area sqft: \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_
1. How many employees are located at your site? \_\_\_\_\_\_\_\_

Comments: *please share any concerns regarding Facilities type services.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_