

CUSTOMER FEEDBACK FORM

Your Detail:							
Name							
Position							
Company Name							
Address							
Business Type							
Telephone \ Cell		E-	-mail				
It is important to know what our client thinks about our certification services and how can we improve. Could you please spare some time to tell us about your customer experience by completing the below: 1- Are you satisfied with the certification services we provided you?							
Yes		No		Somewhat			
Comments if any:				د مناه			
2- Are you satisfied	tne w	ay of performing the audit b	oy our au	aitor?			
Yes		No		Somewhat			
Comments if any:							
3- Did you experience any problem in communicating us by our staff or any other problem?							
Yes		No		Somewhat			
Comments if any:							

4- Did your company improve the market reputation after getting certification by us?

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Yes	No	Somewhat	
Comments if any:			

5- If you have any Suggestion or Observation, Please write to us.

Suggestion/Observation:		

Signature	
Date	

Thanking you.

With Best Regards, ANIC Halal Authority

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ANIC – F022 / REV-00
ISSUE DATE: 15-05-17