

SERVICE TIME EXPECTATION

Dunrenvin 4					
CUSTOMER NAME:			SERVICE ADVISOR NAME:		
□ New Service Cu	stomer 🗆 Repeat Service	Customer □ Ap	ppointment 🗆 Non-App	ointment	
for your time we are using expectation to complete y	e Group we understand thang this document to clearly our service or repair visit we communicate with you if a	y communicate twith us today. We	o you what we consider will do our best to delive	to be a valid time er upon our agreed	
TIME IN:	TIME EXP	PECTATION GIVEN	TIME	OUT:	
Did we	achieve our communicate	d service time exp	pectation? YES NO		
	REAS	ON FOR DELAY:			
	Were you completely satisfied with your service experience? YES □ NO □ Would you like to discuss anything with the service manager today? YES □ NO □				
	•	, ,	e service manager today: pair, or maintenance need		
	CUSTOMERS	IDE.	CERVICE ADVICOR CICALATURE		
	CUSTOMER SIGNATU	JUE'	SERVICE ADVISOR SIGNATURE:		