

Auto Detailing Service Quality Assessment Form

Date

Customer Name

Vehicle Make/Model

Service Type

Service Quality Assessment

Exterior Cleanliness

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

Interior Cleanliness

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

Attention to Detail

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

Staff Professionalism

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

Overall Experience

- ☐ 1
- ☐ 2
- ☐ 3

☐ 4

☐ 5

Comments & Suggestions