Vehicle Rental Experience Evaluation Form

| Full Name |
|---|
| |
| Email Address |
| Lindii Address |
| |
| Phone Number |
| |
| Vehicle Rented |
| |
| |
| Rental Process |
| How would you rate the booking process? |
| 1 |
| 1 C |
| 2 C |
| 3 |
| C 4 |
| C |
| 5 |
| How would you rate vehicle pickup experience? |
| 1 |
| |
| 2 C |
| 3 • C |
| 4 |
| C 5 |
| |
| Vehicle Condition |
| How satisfied were you with the cleanliness of the vehicle? |
| 1 |
| |
| 2 C |

| 3 C |
|---|
| 4 C |
| 5 |
| How satisfied were you with the condition of the vehicle? |
| C |
| 1 C |
| 2 C |
| 3 C |
| 4 C |
| 5 |
| Customer Service |
| How would you rate the customer service? |
| C |
| 1 C |
| 2 |
| C |
| 3 • C |
| 4 |
| C 5 |
| |
| Overall Experience |
| How would you rate your overall experience? |
| |
| 1 C |
| 2 C |
| 3 C |
| 4 C |
| 5 |
| Additional Comments |
| |
| |