



CMA, Inc.
8425 Progress Drive, Suite BB
Frederick, MD 21701
Phone: 240-215-9700 Fax: 240-215-9721

CMA PO#

Customer Acceptance Form

Site Reference: _____ **Customer PO #:** _____
Site Address: _____
(please print) _____

Following the visit to the above referenced installation, I hereby state that the work has been carried out by the installers from CMA to my satisfaction.

Contact Name: (please print) _____
Title: _____
Signature: _____
Date: _____

As a part of our total Quality Control procedure we measure all aspects of the services that we provide. This survey enables us to correctly determine the performance of our installation technicians while on your premises. It is our commitment to deliver a professional service and exceed your expectations on our visit. Your comment and performance ratings are a vital part of our quality process.

| Please Check One: | 1 Poor | 2 Fair | 3 Good | 4 Very Good | 5 Excellent |
|-------------------|-----------|-----------|-----------|----------------|----------------|
| Installation | () | () | () | () | () |
| Service | () | () | () | () | () |

Comments:

furnishing the life you want.