



RETURN COMPLETED FORM TO

NAME (Optional)

TELEPHONE NUMBER (Optional)

DATE

Site Manager (033A3)

CLEANLINESS AND APPEARANCE OF THE BUILDING

	EXCELLENT	GOOD	AVERAGE	FAIR	POOR	N/A
Building Exterior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Lobby	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Elevators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Corridors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Office Areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rest Rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windows	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Odors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extermination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

HEATING AND AIR CONDITIONING

	EXCELLENT	GOOD	AVERAGE	FAIR	POOR	N/A
Reliability of Heating and Air Conditioning?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have you ever reported a problem with heating or air conditioning? Yes No

If yes, was it handled promptly and courteously? Yes No

BUILDING STAFF

	EXCELLENT	GOOD	AVERAGE	FAIR	POOR	N/A
Response time of building staff requests for service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ELEVATOR SERVICE

	EXCELLENT	GOOD	AVERAGE	FAIR	POOR	N/A
Elevator service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have you ever reported a problem? Yes No

VA SITE MANAGER

Is the VA Site Manager assigned to this Building courteous and helpful when you request service? Very Somewhat Not

BUILDING SATISFACTION

Overall, how satisfied are you with the Building? Very Somewhat Not

SUGGESTIONS

DO YOU HAVE ANY SUGGESTIONS TO IMPROVE BUILDING AND/OR SERVICES?