



འཇམ་ལྷན་ཁང་གི་འཕེལ་རྒྱུ་ལྷན་ཁང་།
 ས་རིག་དང་ས་གཏིར་ལས་ཁུངས།
 Ministry of Energy and Natural Resources
 Department of Geology & Mines
 Chemical Laboratory



Customer Feedback Form

Version: 1

CL/F/8.6/01

Customer's Name (Optional):

Customer Address (Optional):

Feedback:

Scaling (1-5): 1 – Needs More attention, 2– Needs Improvement, 3-Good, 4-Very Good and, 5-Excellent.

1. Service given by DGM Chemical Laboratory was,

1	2	3	4	5
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2. Analysis Data given by DGM Chemical Laboratory.

1	2	3	4	5
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3. Time line followed by DGM Chemical Laboratory in delivering test reports.

1	2	3	4	5
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4. Customer support in providing timely information

1	2	3	4	5
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ལུས་ཤུགས་དང་རང་བཞིན་ཐོན་སྐྱེད་ལྷན་ཁག།
 ས་རིག་དང་ས་གཏིར་ལས་ཁུངས།
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Customer Feedback Form

5. Overall satisfaction for service rendered by DGM Chemical Lab.

1	2	3	4	5
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Additional Feedback/Comments:

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Signature:

Date: