



# CENTRAL POLLUTION CONTROL BOARD

(Ministry of Environment, Forest & Climate Change, Govt. of India)

## CUSTOMER FEEDBACK FORM

Test Report No.

Dated: 01/01/0001

Laboratory Name :

| Sr. No. | Name of the Service | Value |
|---------|---------------------|-------|
| 1.      | Sample Receiving    |       |
| 2.      | Test Report         |       |
| 3.      | Communication       |       |

Remark : Not Applicable (NA) to be mentioned in case services are not availed from the Laboratory.

Suggestion for further improvement of Laboratory services.

The Feedback shall be submitted to Divisional Head of concerned Laboratory, CPCB, Delhi along with rating in the scale 1 to 10.

Signature of Division Representative  
(Sample Intender)

Signature of Laboratory Head

Name :

Name :