



INDIAN INSTITUTE OF TECHNOLOGY KANPUR
Office of the Dean of Infrastructure & Planning

DOIP: 107U

User Satisfaction report

(This form should be initiated by IWD/DOIP office to the user for feedback after completion of work)

Requisition details

Name		Phone/ Mob No.																		
Dept./Section		PF No:				Email:														@iitk.ac.in
Request number																				

Work Completion details

Was the work started and finished at the notified times? <i>(Time period of work should be notified to requisitioner/ user committee prior to start of work)</i>	Yes	No
<input type="checkbox"/> On time <input type="checkbox"/> Ahead <input type="checkbox"/> Delayed		
<i>Please include your comments on conduct of work</i>		
Was the work executed in agreement with agreed plans/proposals?	Yes	No
<i>Please note if there was any major deviation from agreed plans</i>		
Was an EIC/Supervisor available for your questions during the execution of work?	Yes	No
Did the EIC do a final walkthrough with you before handing over?	Yes	No
Were all the issues/defects noted during final walkthrough rectified before handing over?	Yes	No
Did you receive an advance notice on any service shutdowns during the work?	Yes	No
Did you receive an advance notice on any restrictions in use of space or utilities during the work?	Yes	No
Was an adequate clean-up done during and after the work?	Yes	No
How satisfied are you with the quality of work done?		
<input type="checkbox"/> Poor <input type="checkbox"/> Average <input type="checkbox"/> Good <input type="checkbox"/> Excellent		
<i>Please include your comments on the work performed (quality, time, workmanship etc.), if any.</i>		
<i>Please include your suggestions for future improvements, if any.</i>		

(Signature of the requisitioner/representative)

Date: ____/____/____
(dd / mm / yyyy)

For DOIP Office Use

Checked Assistant/ Superintendent	Passed
	Note: OIC