Insert your logo

Sample badges

CUSTOMER QUESTIONNAIRE: INDOOR AIR QUALITY

Are there any areas that get too warm… or too cold? (If yes, please explain):

_____

Does your home get too muggy or too dry certain times of the year? (If yes, please explain):

_____

Does anyone in your family suffer from asthma or allergens from airborne particles? ( ) YES ( ) NO

Is the existing heating/cooling system noisy indoors? ( ) YES ( ) NO

What temperature do you set the thermostat in the summer? _____ Winter? _____

What are your peak energy bills in the summer? $_____ Winter? $_____

Please Rate Importance Using a Scale of 1 to 10: (10 extremely important, 1 not important)
Smart phone indoor comfort control:
Saving money on your energy bills:
Consistent air purification:
No repair bills for 10 years:
Priority service when problems arise:
What is most important to you when choosing a company to do business with?