

Telecom Service Delivery Assessment

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Job Title]

[Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

We are conducting a comprehensive assessment of our telecom service delivery and would like to request your feedback regarding your experience with our services. Your insights are invaluable in helping us understand our performance and areas for improvement.

We would appreciate it if you could take a few moments to answer the following questions:

1. How would you rate the quality of service you have received?
2. Was the response time to your inquiries satisfactory?
3. Are there any issues or concerns that you would like to address?
4. How likely are you to recommend our services to others?

Please feel free to provide any additional comments or suggestions that could help us enhance our service delivery.

Thank you for your time and feedback. We look forward to hearing from you.

Sincerely,

[Your Name]

[Your Job Title]

[Your Company Name]

[Your Contact Information]