

# Logistics Customer Experience Evaluation

Date: [Insert Date]

[Your Name]

[Your Position]

[Your Company]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

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Dear [Customer's Name],

We value your feedback regarding your recent experience with our logistics services. Your insights are crucial for us to enhance our offerings and ensure a seamless experience for our customers.

## Experience Evaluation

Please take a moment to evaluate the following aspects of our service:

### 1. Timeliness

Did we meet your delivery deadlines? (Yes/No)

### 2. Communication

How would you rate the effectiveness of our communication throughout the logistics process?  
(1-5)

### 3. Condition of Goods

Were your goods received in satisfactory condition? (Yes/No)

### 4. Overall Satisfaction

Please rate your overall satisfaction with our logistics service. (1-5)

## **5. Additional Feedback**

What can we improve? [Your comments]

Your feedback is incredibly important to us, and we appreciate you taking the time to share your thoughts.

Thank you for choosing our logistics services!

Sincerely,

[Your Name]

[Your Position]

[Your Company]