## **Logistics Service Quality Assessment**

Date: [Insert Date]

To: [Recipient's Name]

[Company Name]

[Company Address]

Dear [Recipient's Name],

We are conducting a quality assessment of the logistics services provided to our organization, and we would appreciate your input. Your feedback is crucial in helping us understand the performance and efficiency of our logistics operations.

## **Assessment Criteria:**

- Timeliness of deliveries
- Condition of delivered goods
- Communication effectiveness
- Problem resolution capability
- Overall satisfaction

Please take a moment to complete the attached survey or respond directly with your insights by [insert response deadline]. Your responses will be kept confidential and will only be used for the purpose of this assessment.

Thank you for your cooperation and support in this important matter. If you have any questions or require further information, please feel free to contact me at [Your Contact Information].

Sincerely,

[Your Name]

[Your Position]

[Your Company]

[Your Contact Information]