

Category of work: \_\_\_\_\_ Contractor: \_\_\_\_\_

### Evaluation of Repair Service Provided by Contractor

In your opinion, was the work satisfactory?  *yes*  *no*  *see comments*

Date of Work: \_\_\_\_\_

Description of Work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Address where work done: \_\_\_\_\_ (optional)

Name of Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Please rate your contractor/service in making the repair:

	Very Good	Average	Poor
On the bidding process: answering question, discussing repair options, writing the bid			
On quality of work			
On starting when promised			
On completing once started			
On fixing problems, if any			

Were there unexpected costs (i.e., was "additional" work needed?)  *yes*  *no*

- Had contractor warned you in advance of the possibility?  *yes*  *no*

- Were the costs fair/reasonable?  *yes*  *no*

Comments on Work – Explanation of Problems – Suggestions to Others

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Source used to find contractor: \_\_\_\_\_

**Statement of Signer**

The statements I have made in the “evaluation of repair Service Provided by Contractor” are expressions of my opinion only and are voluntarily furnished to LakewoodAlive to be shared anonymously with other residents of Lakewood who request to examine it. We have not verified, nor evaluated the accuracy of any of the statements above, positive or negative. Evaluations are provided as a community service. It is the duty of the homeowner to thoroughly check references and screen potential contractors.

I understand that my identity shall not be included in the copy of this evaluation that is made available for examination by anyone. I am signing this statement to verify (1) that the evaluation is my own opinion (2) that I believe it to be fair and truthful, and (3) that the LakewoodAlive has my permission to share my opinion anonymously with other residents.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

**Notice: This statement and signature may not be copied or in any way reproduced**

Please return signed forms to:

**LakewoodAlive  
14701 Detroit Ave, LL10  
Lakewood, Ohio 44107**