



The TiPS Program

“WE CARE”

Consumer Survey



We care about your service and your experience as a valued consumer. Please provide us with an honest assessment of your personal experience with the business and/or professional that you utilized from our program. Your opinion matters to us and to the professionals that are members of the TiPS Program. Our mission is to be a trusted source of referrals and to maintain the integrity of the TiPS Program which stands for Trusted Professional Service.

TiPS Provider Service Quality Survey

Name of Business: _____
and/or

Name of Professional: _____

Type of Service Provided: _____
and/or

Type of Purchase Made: _____

How did you learn about this business?

Referred By: _____

TiPS Directory

TiPS Website

Other: _____

Please rate the overall service they provided?

Superior Great Very Good Good Average Below Expectations Unacceptable

Please provide us with comments about your experience.

Would you consider utilizing this business again? Yes No

Would you recommend this business to a friend? Yes No

Please submit your TiPS Provider Service Quality Survey and any additional comments about our endorsed professionals to our TiPS National Headquarters.

TiPS Network Organization
Attn: Consumer Survey
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