

## Feedback - STPI Statutory Services

(2020-21)

## 1. General Information :

SI No.	Name of the Unit		Details									
1.	Name and Address of Unit											
2.	Name of Contact Person Designation Phone No. Mobile No. Email ID											
Criter	ia for Assessment											
Descri	Description		Rating (Check the relevant Box)									
	(a) Front Office Co- ordination &Support			2		3		4		5		
	(b) Response to Customer Queries			2		3		4		5		
	(c) Turn-Around-Time of Approvals			2		3		4		5		
	(d) Procedures & formats clarity onSTPI Website			2		3		4		5		
(e) Ov	(e) Overall Support from STPI			2		3		4		5		
Rating	Ratings:		Poor : 1		Average : 2			Good : 3				
			Very Good : 4 Excellent : 5									
Sugge	Suggestions if any:											
	Please Specify the n for score 2 or below.									Signa	ture	