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| Recipient EvaluationYVEDDI Weatherization Assistance Program |
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| Job #:       |
| Recipient: |       | County: |       |
| Address: |       |
| City: |       | State: |       | Zip: |       |
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| Please rate the following aspects of your experience with the YVEDDI Weatherization Assistance Program and the crew/contractors who worked at your home. |
|  | **Poor** |  | **Excellent** |
| Communication with the Weatherization Office Staff (during the application process and appointment scheduling) | 1 | 2 | 3 | 4 | 5 |
| Courtesy and cooperation of the Weatherization crew | 1 | 2 | 3 | 4 | 5 |
| Crew was organized and worked well as a team | 1 | 2 | 3 | 4 | 5 |
| Crew kept busy and engaged in work | 1 | 2 | 3 | 4 | 5 |
| Crew cleaned up at the end of the day | 1 | 2 | 3 | 4 | 5 |
| Courtesy and cooperation of other contractors or delivery personnel | 1 | 2 | 3 | 4 | 5 |
| My questions were addressed by the Crew Leader | 1 | 2 | 3 | 4 | 5 |
| Quality of workmanship | 1 | 2 | 3 | 4 | 5 |
| My overall satisfaction with the work | 1 | 2 | 3 | 4 | 5 |
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| Additional Comments: |
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| Recipient Signature | Date |