



<Name>  
 <Address 1>  
 <Address 2>  
 <CITY / STATE>  
 <Bar Code>  
 XXXXXXXXXXXX.XXXXXXXXXX.XXXXXXXXXX.XXXXXXXXXX

For your added convenience, we invite you to complete this survey on the Internet by going to the following Web site:  
**[www.researchhq.com/united](http://www.researchhq.com/united)**.

In order to complete the survey online, please enter the following password:  
 <XXXXXXXXXXXXXXXXXXXX>

Thank you for choosing United to serve you during your recent move. Your evaluation of our moving services is instrumental in our continuous improvement and our commitment to providing services that exceed customer expectations. We appreciate your time in completing this survey. **To submit online, please go to [www.researchhq.com/united](http://www.researchhq.com/united) and log in using your password: xxxx.** If you would prefer to complete this printed survey, please return it in the postage-paid envelope.

If you have questions, please call United's Customer Service Center (800-948-4885) Monday through Friday between 8 a.m. and 5 p.m. Central time.



Sincerely,

Patrick J. Larch, Jr.  
 President

### MOVING PERFORMANCE SURVEY

Using a scale of 5 to 1, where 5 is "excellent" and 1 is "poor," please rate the following questions.  
**Check only one box per question.**

If a question DOES NOT APPLY to your move, please check the "N/A" box.

#### MOVE CONSULTATION AND COORDINATION SERVICES

**1. MOVE CONSULTATION AND ESTIMATING:** *(The United Van Lines moving company you called to arrange your move)*

How would you rate <agency's name> on:

|  | Excellent                |                          |                          |                          | Poor                     |                          | N/A                      |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
|  | 5                        | 4                        | 3                        | 2                        | 1                        |                          | ↓                        |
| a. explaining the move process and services available (i.e., professional packing, coverage options, high-value inventory process, etc.) . . . . . | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. consulting with you on your specific moving needs (i.e., dates, special requirements, etc.) . . . . .   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. thoroughly viewing your household for all items to be moved . . . . .   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. explaining moving charges / pricing. . . . .  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. accurately estimating your total moving charges . . . . .   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. OVERALL rating of Move Consultation and Estimating . . . . .  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**2. MOVE COORDINATION:** *(The United Van Lines moving company that consistently communicated with you to manage the details of your entire move, including answering your questions and tracking the progress of your move)*

How would you rate <agency's name> on:

|   | Excellent                |                          |                          |                          | Poor                     |                          | N/A                      |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
|   | 5                        | 4                        | 3                        | 2                        | 1                        |                          | ↓                        |
| a. keeping you informed and providing timely follow-up throughout your move . . . . . | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. availability to assist you during your move . . . . .                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. coordinating the details of your move . . . . .                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. OVERALL rating of Move Coordination . . . . .                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## PACKING SERVICES

3. **PACKING CREW:** *(The moving company who packed your household items into boxes)*
- |   | Excellent<br>5           | 4                        | 3                        | 2                        | Poor<br>1                | N/A                      |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>How would you rate the Packing Crew on:</b>                                |                          |                          |                          |                          |                          |                          |
| a. carefully packing your household items into boxes . . . . .                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. treating your residence and belongings with respect. . . . .               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. accurately labeling packed boxes with contents and room location . . . . . | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. OVERALL rating of Packing Crew . . . . .                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## LOADING SERVICES

4. **How would you rate the Driver and Loading Crew who loaded your belongings onto the truck on:**
- |   | Excellent<br>5           | 4                        | 3                        | 2                        | Poor<br>1                | N/A                      |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. explaining the inventory process . . . . .   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. protecting your residence during loading ( <i>flooring, doorways, etc.</i> ) . . . . . | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. handling your belongings with care . . . . .   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. managing an organized and efficient loading process. . . . .                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. OVERALL rating of Driver and Loading Crew . . . . .                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## DELIVERY SERVICES

5. **How would you rate the Driver and Delivery Crew who unloaded your belongings from the truck on:**
- |  | Excellent<br>5           | 4                        | 3                        | 2                        | Poor<br>1                | N/A                      |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. protecting your residence during delivery ( <i>flooring, doorways, etc.</i> ) . . . . . | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. handling your belongings with care . . . . .  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. providing time and assistance as you check off the receipt of your belongings . . . . . | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. correctly reassembling items disassembled by the driver / loading crew . . . . .        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. managing an organized and efficient delivery process . . . . .                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. OVERALL rating of Driver and Delivery Crew . . . . .                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## OVERALL MOVE EXPERIENCE AND RECOMMENDATION

6. **Considering the entire move experience, how would you rate United Van Lines' performance on your recent move?**
- |   | Excellent<br>5           | 4                        | 3                        | 2                        | Poor<br>1                | N/A                      |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| rate United Van Lines' performance on your recent move? . . . . . | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

7. **Would you recommend United Van Lines to a friend, relative or associate?**
- |       | Definitely would recommend | Would recommend          | Might or might not recommend | Would not recommend      | Definitely would not recommend |
|-------|----------------------------|--------------------------|------------------------------|--------------------------|--------------------------------|
| ..... | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>     | <input type="checkbox"/> | <input type="checkbox"/>       |

8. **Based on the ratings you submitted, please provide specific comments or suggestions related to your recent move with United Van Lines.**

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9. **Please list the names and positions of any individuals you believe should be recognized for exceptional performance, along with the reasons why they deserve special recognition.**

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*Thank You for participating in this survey!*

Please return your completed survey in the business-reply envelope provided.

