Customer Satisfaction Report Form 003

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Vessel:	L'EACOV POWIN	Dates of Project:	3-3-103-11-21
SEACOR Representative:	DAVID LADET	Client:	TAIDS ENARDY
Client Representative:		References:	
Client Address and #	Ū		

Instructions: 1. The Marketing or Operations Department will provide this blank form to the client's representative

- 2. The Completed form should be returned the person sending.
- 3. This form is to be retained along with any supporting documentation
- 4. Customers may receive follow-up information regarding this evaluation by providing their contact information.

Ratings:

- 1. Needs Improvements
- 2. Below Expectations
- 3. Meets Expectations
- 4. Above Expectations
- 5. Exceeds Expectations

Vessel Evaluation:

Appearance:	8	Performance:	2	
Cleanliness:	5	Safety Equipment:	5	
Maintenance:	S	Accommodations:	کے	
Safety Meetings:	2	Safety Drills:	5	

Crew Evaluation:

Attitude:	5	Knowledge:	5	
Appearance:	ک	Promptness:	2	
Performance:	5	Engineer:	S	
Captain:	5	Deck Crew:	3	
Mate:	5	Cook:	5	

Administrative Shore Side Support:

Attitude:	NIA	Knowledge:	N/A	
Response:	NOIA.	Other:	N/A	
			/	

Comments and Recommendations:

Client Representative:

Name:	Position:	Company Rep
Signature:	Date:	3-15-21
Detention Deviced 2 House		

Retention Period - 3 years

QMSR6 APPROVED BY: DPA	EFFECTIVE DATE: 28 JAN 2020

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