



SHOP INFORMATION

Location: _____

Employee Name: _____
 (Nametags are not required)

Gender: Male Female

Shop Date: _____
 Hair Length: _____

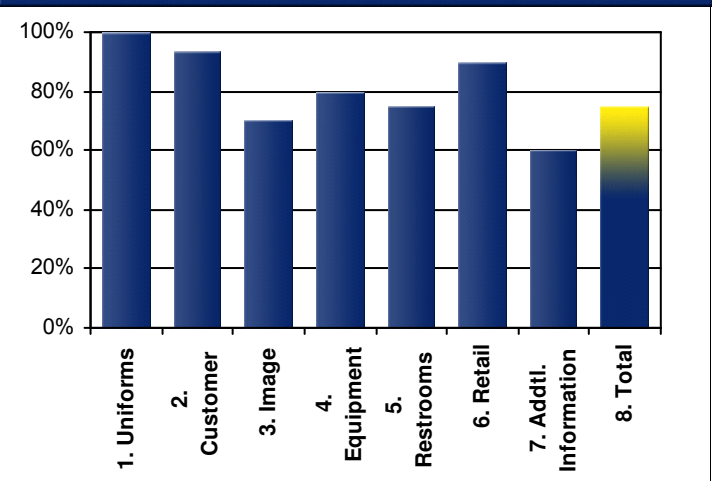
Time Range: _____ - _____
 Hair Color: _____

Weather: _____
 Glasses: Yes No

SCORE ANALYSIS

	SCORE	POSSIBLE	PERCENTAGE
Uniforms:	<input type="text"/>	10 pts	<input type="text"/>
Customer Service:	<input type="text"/>	35 pts	<input type="text"/>
Image:	<input type="text"/>	17 pts	<input type="text"/>
Public Restrooms:	<input type="text"/>	18 pts	<input type="text"/>
Retail Execution:	<input type="text"/>	10 pts	<input type="text"/>
Addtl. Information:	<input type="text"/>	10 pts	<input type="text"/>
Total:	<input type="text"/>	100 pts	<input type="text"/>

PERFORMANCE SUMMARY



UNIFORMS

YES NO N/A POSSIBLE SCORE

1. Were all CSRs in proper uniform and neat and clean in appearance? YES NO N/A POSSIBLE SCORE

*(This is a Distributor location, and with one *exception {see below}, Distributors set their own uniform standards. For Distributors, Sunoco's only uniform requirement is that CSRs can be identified as such. The CSR could simply be wearing a name tag, or have a Sunoco hat, or if the location is called "Ray's Sunoco", they could be wearing a T-shirt that says "Ray's". If they are wearing ANYTHING that identifies them as a CSR, you will consider them in "proper uniform".*

**Exception: If the location is branded "OPTIMA", CSRs are required to wear black or tan pants or shorts (no jeans), an Optima shirt and/or a blue vest.*

- CSR(s) not in proper uniform inside the store
 - Could not be identified as CSR(s)
 - Optima Locations Only: Not wearing Optima shirt or blue vest
 - Optima Locations Only: Not wearing black, or tan pants/shorts
- CSR(s) not in proper uniform outside the store
 - Optima Locations Only: Not wearing Optima logo'd vest or coat
 - Optima Locations Only: Not wearing black, or tan pants/shorts
- Uniform(s) not neat and clean in appearance (excessively dirty, faded, wrinkled, etc.)

Please describe what CSRs were wearing:

Uniforms Total Points:



CUSTOMER SERVICE		YES	NO	POSSIBLE SCORE
Number of CSRs present: _____ Number of registers open: _____ Number of customers in line: _____				
2. Did the CSR greet you verbally, engage you in a friendly manner and make eye contact? <i>(Greeting MUST be verbal & polite, such as "Good morning!" Non-polite statements such as "Next" or nods/hand gestures do not count.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	10 pts	<input type="text"/>
<input type="checkbox"/> CSR did not verbally greet	<input type="checkbox"/> CSR was not friendly			
<input type="checkbox"/> CSR did not make eye contact				
3. Did the CSR offer a sincere and friendly closing remark? <i>(Closing remark MUST be verbal & polite, such as "Have a nice day!", or "Come see us again!" Non-polite statements such as "There you go", or "Is that it" or nods/hand gestures do not count.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	10 pts	<input type="text"/>
4. Did the CSR give you their undivided attention during your transaction?	<input type="checkbox"/>	<input type="checkbox"/>	5 pts	<input type="text"/>
5. Did the CSR offer prompt service?	<input type="checkbox"/>	<input type="checkbox"/>	5 pts	<input type="text"/>
6. Did the CSR offer an additional revenue producing item, service or credit card application?	<input type="checkbox"/>	<input type="checkbox"/>	5 pts	<input type="text"/>
7. How long did you wait in line? (Information only) Time in line: ____ Min. ____ Sec.				
Customer Service Comments:				
<input type="text"/>				
Customer Service Total Points:				35 pts <input type="text"/>
<i>0-6 = Net Detractor, 7-8 = Neutral, and 9-10 = Net Promoter (informational purposes)</i>				
0 1 2 3 4 5 6 7 8 9 10				
8. I felt welcomed during my shopping experience.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain your answer:				
<input type="text"/>				

IMAGE		YES	NO	POSSIBLE SCORE
Exterior Assessment:				
9. Were all letters, numbers and product labels posted on the ID/price sign? <i>(The sign should not have missing numbers or product labels.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	3 pts	<input type="text"/>
10. Were pumps, pump handles and islands clean and in good repair? <i>(Areas such as the gas dispenser top, front, sides and handles should appear to have been cleaned within the past 24 hours. Mark down for graffiti, dirt, grease, spills or bird droppings.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	2 pts	<input type="text"/>
<input type="checkbox"/> Pumps/pump handles dirty	<input type="checkbox"/> Pumps/pump handles damaged			
<input type="checkbox"/> Excessive dirt/debris present on islands <i>(6 or more pieces of trash/debris on island)</i>	<input type="checkbox"/> Peeling paint or excessive damage to island curbs			
11. Were current Sunoco credit card applications present at the pump?	<input type="checkbox"/>	<input type="checkbox"/>	2 pts	<input type="text"/>
12. Were island supplies available and trash receptacles not overflowing? <i>(The squeegee must be in good condition, such that it would not scratch your windows. It is OK for fluid to appear a little discolored, but fluid must NOT be frozen. Trash receptacles must not be overflowing. This evaluation refers to the small trash cans found throughout the exterior, NOT the dumpster.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	2 pts	<input type="text"/>
<input type="checkbox"/> Squeegees not available	<input type="checkbox"/> Fluid not available			
<input type="checkbox"/> Paper towels not available / NJ only: Not available upon request	<input type="checkbox"/> Trash receptacle(s) overflowing			



IMAGE (cont'd) YES NO N/A POSSIBLE SCORE

Exterior Assessment:

13. Were the building exterior, lot, and landscaping clean and in good condition, with all areas free of trash, old tires and graffiti? YES NO 2 pts
- (These areas should appear well maintained and swept on a daily basis. Only evaluate the station site, not adjacent lots or the street.)*
- Building damaged/dirty
- Lot damaged/dirty or excessive trash present
(6 or more pieces of trash/debris on lot)
- Landscaping poorly maintained/excessive trash present
(6 or more pieces of trash/debris in landscaping)
- Old tires present on lot Graffiti present
14. Was the dumpster area well maintained? (In customer view) YES NO 2 pts
- (The dumpster should not be overflowing with trash.)*

Interior Assessment:

15. Was the sales area floor clean with product and shelving well stocked and free of excessive dust? YES NO N/A 2 pts
- (The floor should be free of litter and old dirt. Do NOT mark off for water or snow tracked in due to current or recent rain/snow.)*
- Floor not clean
- Product not well-stocked (4+ outages per cooler door or single shelving unit)
- Excessive dust on shelving/product displays
16. Were doors and windows free of excessive signs, decals, smudges and old tape? YES NO 2 pts
- (Do not mark off for 1 or 2 fingerprints. Mark off if doors/windows have the appearance of not being cleaned in awhile.)*
- Excessive signage/decals present Excessive smudges/old tape present

Image Comments:

Image Total Points: 17 pts

0-6 = Net Detractor, 7-8 = Neutral, and 9-10 = Net Promoter (informational purposes)

17. The location image was well kept and inviting. 0 1 2 3 4 5 6 7 8 9 10
- Please explain your answer:

0-6 = Net Detractor, 7-8 = Neutral, and 9-10 = Net Promoter (informational purposes)

18. I would shop at this site again. 0 1 2 3 4 5 6 7 8 9 10
- Please explain your answer:



EQUIPMENT	YES	NO	N/A
19. Were all pumps operational? (Informational purposes)	<input type="checkbox"/>	<input type="checkbox"/>	
20. Was the CRIND (Card Reader in Dispenser) operational? (Informational purposes) <i>(As long as you are able to scan your card and pump fuel, answer "yes".)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. If applicable, were you able to obtain a receipt from your pump? (Only answered if the Auditor was able to make their purchase at the pump) (Informational purposes)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Comments: <div style="border: 1px solid black; height: 30px; width: 100%;"></div>			

PUBLIC RESTROOMS	YES	NO	N/A	POSSIBLE SCORE						
Which restroom was observed: <input type="checkbox"/> Mens <input type="checkbox"/> Womens <input type="checkbox"/> Unisex <input type="checkbox"/> Restroom Being Cleaned <input type="checkbox"/> Out of Order <input type="checkbox"/> No Public Restrooms										
22. Were restroom floors, lights, doors, walls, and trash receptacles clean and in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5 pts						
<input type="checkbox"/> Restroom elements dirty <input type="checkbox"/> Floors <input type="checkbox"/> Lights <input type="checkbox"/> Doors <input type="checkbox"/> Walls <input type="checkbox"/> Trash Receptacle										
<input type="checkbox"/> Restroom elements in poor condition <input type="checkbox"/> Floors <input type="checkbox"/> Lights <input type="checkbox"/> Doors <input type="checkbox"/> Walls <input type="checkbox"/> Trash Receptacle										
23. Were restroom fixtures clean, present and operational?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5 pts						
<input type="checkbox"/> Fixture(s) dirty <input type="checkbox"/> Sink/Faucet <input type="checkbox"/> Mirror <input type="checkbox"/> Toilet <input type="checkbox"/> Urinal (If present)										
<input type="checkbox"/> Fixture(s) not present or not operational <input type="checkbox"/> Sink/Faucet <input type="checkbox"/> Mirror <input type="checkbox"/> Toilet										
24. Were restroom supplies well stocked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4 pts						
<input type="checkbox"/> Soap <input type="checkbox"/> Toilet Paper <input type="checkbox"/> Towels/Dryer										
25. Was the restroom odor free? <i>(Do NOT mark off for cigarette smoke, odors due to recent customer "use" or odors from cleaning chemicals. Mark off for a moldy or old, dirty smell.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4 pts						
Restroom Comments: <div style="border: 1px solid black; height: 30px; width: 100%;"></div>										
Restroom Total Points:				18 pts						
<i>0-6 = Net Detractor, 7-8 = Neutral, and 9-10 = Net Promoter (informational purposes)</i>										
0 1 2 3 4 5 6 7 8 9 10										
26. I would stop again at this location to use the public restroom.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain your answer: <div style="border: 1px solid black; height: 30px; width: 100%;"></div>										



RETAIL EXECUTION	YES	NO	N/A	POSSIBLE	SCORE
27. Was the current Brand campaign in place and in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10 pts	<input type="text"/>
Retail Execution Comments:					
<input type="text"/>					
Retail Execution Total Points:				10 pts	<input type="text"/>

ADDITIONAL INFORMATION	YES	NO	POSSIBLE	SCORE	
28. Was drug paraphernalia being merchandised at the branded outlet?	<input type="checkbox"/>	<input type="checkbox"/>	5 pts	<input type="text"/>	
a. If yes, please note what type of paraphernalia was being merchandised:					
<input type="checkbox"/> Pipes					
<input type="checkbox"/> Tubes for concealing illegal drugs					
<input type="checkbox"/> Roach Clips					
<input type="checkbox"/> Instructions / Descriptive Material					
<input type="checkbox"/> Containers					
29. Were adult sophisticates being merchandised at the branded outlet?	<input type="checkbox"/>	<input type="checkbox"/>	5 pts	<input type="text"/>	
a. If yes, please note what type of sexually explicit material was being merchandised:					
<input type="checkbox"/> Magazines					
<input type="checkbox"/> DVD's					
<input type="checkbox"/> Videotapes					
<input type="checkbox"/> CD's					
Additional Information Total Points:				10 pts	<input type="text"/>

OVERALL STATION IMPRESSION																						
<i>0-6 = Net Detractor, 7-8 = Neutral, and 9-10 = Net Promoter (informational purposes)</i>																						
30. Based solely on today's visit, excluding the location's proximity to your home, how likely would you be to recommend this Sunoco location to friends and family?																						
<table style="display: inline-table; border: none;"> <tr> <td>0</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td> </tr> <tr> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </table>	0	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Please explain your answer:																						
<input type="text"/>																						

OVERALL EVALUATION COMMENTS
<input type="text"/>



DIGITAL PHOTO

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JobID:

Please note: Additional photos may be available based on the results of your report at the Sunoco Mystery Shop Website.