



Customer Satisfaction Questionnaire Marketing & Sales

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Name:	Location:
Date:	Contact (Optional)

Dear Customer,

We want to thank you for giving us the opportunity to serve you. Please help us to serve you better by taking a couple of minutes to tell us about the service that you have received so far. We appreciate your business and want to make sure we meet your expectation.

How do you Rate Our:

Nr.	Description	Rating Criteria and Values (Please Mark in given options)			
		Excellent 4	Good 3	Satisfactory 2	Dissatisfy 1
1	Product Quality				
2	Recovery of Damages, Return and Rejections				
3	Cleanliness and Hygiene Status of Product & Trays				
4	Packaging Quality				
5	Delivery Time Performance				
6	Delivery Information and Documentation				
7	Sale Team Cooperation				
8	After Delivery or After Sale Services				
9	Complaint Handling				
10	Overall satisfaction level				

Any Other Remarks:

Customer Representative and Sign

Please send your feedback by return fax: +966 – 13 – 847 2158 or Email : info@karimfi.com