M&P SEALING

CUSTOMER SATISFACTION

COMPANY: _____ DATE: _____

LOCATION: _____

In an attempt for us to better serve you and identify your needs, we have this questionnaire to inform us on how we are doing. This information will help us to upgrade our continuous quality improvement program. Your input will be greatly appreciated and we would like to thank you in advance for your cooperation.

Management of M&P Sealing

Personnel:													
	Professional:	**Poor**	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**Excellent**
	Knowledgeable:	**Poor**	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**Excellent**
Products:													
	Perform as Expected:	**Poor**	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**Excellent**
	Delivered as Required:	**Poor**	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**Excellent**
	Properly Packaged:	**Poor**	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**Excellent**
	Properly Tagged & Labeled	**Poor**	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**Excellent**
Service:													
	Response by Outside Sales:	**Poor**	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**Excellent**
	Response by Inside Sales:	**Poor**	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**Excellent**
	Sales Literature:	**Poor**	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**Excellent**
Over All Performance:		**Poor**	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**Excellent**

Note :- If you evaluate below 7,please mention the reason: _____

Comments:

SIGNATURE: