



Customer Satisfaction

Please take a moment to help us improve our service by completing the questionnaire below.
All completed questionnaires will be entered into a draw, please ensure you add your contact details.

Please Rate with a Tick : 1 = Very Poor, 2 = Poor, 3 = Good, 4 = Excellent

Our Telephone Response :	1	2	3	4	5
1 Speed at which we answer the Telephone ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Product knowledge displayed by our Tele-Sales Staff ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Speed in which we return your Enquiries ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Telephone manner of our Tele-Sales Staff ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Which telephone No. do you normally use to ring Lamberts ?	<input type="text"/>				
Our Stock and Deliveries :	1	2	3	4	5
6 Availability of Stock ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Length of time to complete Part Orders ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Service on 'Specials' ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Deliveries arrive as promised ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Representation :					
10 Has sufficient knowledge of the Lamberts Product Range ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
11 Visit regularly ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
12 Displays courtesy, professionalism and friendliness ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
13 Suggest ways for you to reduce your Purchasing Costs ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Resources :					
14 Do you prefer dealing with one Tele-Sales Contact ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
15 Do you know our opening times ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
16 Have you visited our website (www.Lamberts.co.uk) ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
17 Do you require a login for our website ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
18 Do you have a copy of our Lamberts : Draper Catalogue ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
19 Do you know the advantage of linking your part No.s to ours ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
20 Have you ever visited our premises to view our Stocks etc. ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	

Completed by	Date
Email	Company