Customer Satisfaction Survey



We truly value your feedback and would ask that you please take a few minutes and complete the following survey in order to assist us with serving you better. Your opinions are greatly appreciated.

ore Name: Store Number:						
Address:						
Contact Name: Date Completed (dd/mm/yy):						
STATEMENT	EXCELLENT	GOOD	AVERAGE	FAIR	POOR	N/A
Overall, my experience with Dovre Imports is?						
Overall, Dovre's customer service is?						
DESIGNATED SALES ASSOCIATE / TERRITORY MANAGER			,			
His/her ability to respond to my requests in a timely manner is?						
His/her energy, attitude and willingness to help is?						
His/her ability to answer my questions is?						
His/her knowledge of Dovre's products/services is?						
His/her ability to offer advice that positively contributes to my business is?						
His/her overall professionalism is?						
OFFICE STAFF						
The responsiveness to my inquiries is?						
The level or professionalism in the Dovre office is?						
WAREHOUSE / DISTRIBUTION	· · · · · · · · · · · · · · · · · · ·		<u>, </u>		,	
The accuracy of orders received is?						
Dovre's ability to get my order to me when I expect it to arrive is?						
The condition of my order when it arrives is?						
PRODUCT OFFERING						
The quality of the products offered is?						
The diversity of the product offering is?						
What could we do to Improve?						
what could we do to improve:						
General Comments:						
Please return completed surveys to us by:						

All completed surveys returned to Dovre by July 31st, 2012 will be entered in a draw for \$50 of Dovre Credit!!

MAIL TO:
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FAX TO: 604-234-4546

EMAIL TO: reception@dovreimport.com

THANK YOU FOR YOUR CONTINUED SUPPORT