

***CUSTOMER SATISFACTION SURVEY  
Preformed Line Products (Thailand) Ltd.***

**Sales :-**

1. Please rank the following customer service satisfaction attributes.

	Very poor	Somewhat satisfactory	About average	Very satisfactory	Superior
<i>Response Time to Queries</i>					
<i>Speed of Quoting</i>					
<i>Efficient Communication</i>					
<i>Customer support</i>					
<i>Sufficient information</i>					
<i>Quality of documentation</i>					

*Comments :*

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**Quality:-**

2 How would you rate Preformed Line Products (Thailand) Ltd's efficiency in handling customer complaints?

	Very poor	Somewhat satisfactory	About average	Very satisfactory	Superior
<i>Numbers of NCR</i>					
<i>Response time to NCR</i>					
<i>Quality of approach</i>					
<i>Replacement time</i>					
<i>Quality of report (root cause analysis)</i>					

*Comments:*

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## Supply Chain:-

3. Please rank the following attributes related to shipments.

	Very poor	Somewhat satisfactory	About average	Very satisfactory	Superior
<i>Clarity and accuracy of shipment schedules</i>					
<i>Ship to request performance</i>					
<i>Ship to promise performance</i>					
<i>Quality of shipping documentation</i>					

*Comments:*

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## Overall :-

4. How would you rate Preformed Line Products (Thailand) Ltd. on the following competitiveness attributes?

	Very poor	Somewhat satisfactory	About average	Very satisfactory	Superior
<i>Cost</i>					
<i>Product Quality</i>					
<i>On Time Delivery</i>					
<i>Product innovation/development</i>					

*Comments:*

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*We would also request you to provide your view regarding potential opportunities that could be viable for future growth. These potentials might be in terms of identifying untapped market/s, extension in product line/s, new product lines, developing new accounts etc.*

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*Thank you for your feedback. We sincerely appreciate your honest opinion and will take your input into consideration while providing our services in the future. Please feel free to give your additional comments (positive or negative) and suggestions.*

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**PERSONAL DATA**

1. Name of Company: \_\_\_\_\_
  
2. Address: \_\_\_\_\_  
\_\_\_\_\_
  
3. Contact Person: \_\_\_\_\_  
*(Person filling in the questionnaire)*
4. Title: \_\_\_\_\_  
*(Person filling in the questionnaire)*
5. Contact details:
  - a. Telephone no.: \_\_\_\_\_
  - b. Fax no.: \_\_\_\_\_
  - c. E-mail address: \_\_\_\_\_