

Questionnaire Customer Satisfaction



We would like to improve constantly our service to you.
Please help us by filling in this questionnaire and sending it back to us.

The questionnaire can be filled in in the computer, by hand after printing it, or on the internet on www.dueker.de/en/customer-satisfaction.

Company: _____ Date: _____
 Address: _____ Filled in by: _____
 Town/Country: _____

Düker product sector

<input type="checkbox"/>	Fittings and Valves	<input type="checkbox"/>	Drainage Technology
<input type="checkbox"/>	Glass-Lining Technologies	<input type="checkbox"/>	Jobbing Foundry

How satisfied are you with Düker?

How important is this topic to you?

- ← → +

- ← → +

Remarks

1. Product Quality	<input type="text"/>	<input type="text"/>	_____
2. Deliveries			
delivery terms	<input type="text"/>	<input type="text"/>	_____
completeness	<input type="text"/>	<input type="text"/>	_____
punctual delivery	<input type="text"/>	<input type="text"/>	_____
packing	<input type="text"/>	<input type="text"/>	_____
3. Quotation quality			
commercial aspects	<input type="text"/>	<input type="text"/>	_____
technical aspects	<input type="text"/>	<input type="text"/>	_____
schedule aspects	<input type="text"/>	<input type="text"/>	_____
4. Handling of orders	<input type="text"/>	<input type="text"/>	_____
5. Handling of complaints	<input type="text"/>	<input type="text"/>	_____
6. Support by our staff			
skill level	<input type="text"/>	<input type="text"/>	_____
friendliness	<input type="text"/>	<input type="text"/>	_____
reachability	<input type="text"/>	<input type="text"/>	_____
flexibility	<input type="text"/>	<input type="text"/>	_____
7. Product documentation	<input type="text"/>	<input type="text"/>	_____
8. Innovativeness	<input type="text"/>	<input type="text"/>	_____
9. Düker market position and image	<input type="text"/>	<input type="text"/>	_____

10. Where could we improve in your opinion?
