



Client Questionnaire

Name of Company (at your discretion) Date

1. How long have you been using Synergy for your printed products /service?

- 1 month or less
- Between 1 and 6 months
- Longer than 6 months
- Not at all

2. In which of the following fields do you use Synergy?

- Primarily printing B2
- Primarily printing B1
- All services
- Only prices so far
- Other, namely

3. What type of proofs do you tend to opt for?

- PDF's
- Epson Digital (colour accurate)
- Contract Lasers
- Non required

4. In comparison to other printing companies you may use/have used - our **prices** are;

- Much better
- Better
- About the same
- Worse
- Much worse
- I know of no other

5. In comparison to other printing companies you may use/have used - our **customer service** is;

- Much better
- Better
- About the same
- Worse
- Much worse
- I know of no other

6. In comparison to other printing companies you may use/have used our **quality** is;

- Much better
- Better
- About the same
- Worse
- Much worse
- I know of no other

7. Would you buy print from Synergy again?

- Definitely
- Probably
- Probably not
- Definitely not

8. Have you/would you recommended Synergy to other people?

- Yes
- No

9. How satisfied are you with the following items?

	Very Satisfied	Satisfied	Dissatisfied
Cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Customer Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Documentation (Quote, PDF, Invoice etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

