

|                              |                                  |
|------------------------------|----------------------------------|
| Company:                     | Date:    /    /                  |
| Name:                        | Position:                        |
| Nature of Business/Industry: | Primary Contact at Unique Laser: |

Thank you for taking some time to complete this survey. Your responses feed directly back into our business as we seek to improve as a supply partner to your business.

Please rate the following points by simply placing a tick in the appropriate column.

## 1. Customer Service Experience

|  | <i>Excellent</i> | <i>Very Good</i> | <i>Good</i> | <i>Fair</i> | <i>Poor</i> |
|--|------------------|------------------|-------------|-------------|-------------|
| Sales appointments are kept and on time      |                  |                  |             |             |             |
| Sales representative visits provide value    |                  |                  |             |             |             |
| Calls handled courteously and professionally |                  |                  |             |             |             |
| Correspondence responded to promptly, fully  |                  |                  |             |             |             |
| Request for quotation (RFQ) acknowledged     |                  |                  |             |             |             |
| Quotation received promptly and in full      |                  |                  |             |             |             |
| Quotation presentation clear and informative |                  |                  |             |             |             |
| Technical advice provided                    |                  |                  |             |             |             |
| Follow-up is timely and efficient            |                  |                  |             |             |             |
| Lead time                                    |                  |                  |             |             |             |
| Price  |                  |                  |             |             |             |
| Order confirmation received                  |                  |                  |             |             |             |
| Delivery information communicated            |                  |                  |             |             |             |
| Progress updates provided                    |                  |                  |             |             |             |
| Overall experience of Customer Service       |                  |                  |             |             |             |

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| Comments: |
|           |
|           |

## 2. Supply Quality

|                             | <i>Excellent</i> | <i>Very Good</i> | <i>Good</i> | <i>Fair</i> | <i>Poor</i> |
|-----------------------------|------------------|------------------|-------------|-------------|-------------|
| Accuracy of part dimensions |                  |                  |             |             |             |
| Quality of cut              |                  |                  |             |             |             |
| Quality of folding          |                  |                  |             |             |             |
| Quality of welding          |                  |                  |             |             |             |
| Material condition          |                  |                  |             |             |             |
| Delivery on time            |                  |                  |             |             |             |
| Delivery in full            |                  |                  |             |             |             |
| Packing                     |                  |                  |             |             |             |
| Labelling                   |                  |                  |             |             |             |
| Achieved expectation        |                  |                  |             |             |             |

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|-----------|
| Comments: |
|           |
|           |

**Thank you for your time**  
**Please return your survey as an attachment and email it to [Survey@uniquelaser.com.au](mailto:Survey@uniquelaser.com.au)**