

Client Service Survey

Provided by MLJ Insurance



Dear :

We want to thank you for providing us with the opportunity to serve you. At MLJ Insurance, we are continually striving to provide you and your employees with the best service available. Please help us by taking a few minutes to complete this customer service questionnaire.

Client Information

Name:

Title:

Phone:

Date:

Account Manager Name:

General

1. How many years have you been a client?

0 - 3 years

3 - 5 years

5 - 10 Years

10+ years

2. What services do you value most?

Competitive pricing

Custom service

Appreciates my business

Policy design and cost-saving strategies

Access to online health management tools

Understanding of my organization and industry

Other

3. Please rank, in order of importance, your criteria for choosing an agent/broker.

- | | |
|--|----------------------|
| Relationship | Customer service |
| Ability to challenge and negotiate our renewal | Value-added services |
| Regulation communication | Reputation |
| Competitive pricing | Personal referral |
| Compliance advice | |

Service Characteristics

	Excellent	Above Average	Average	Below Average	Comments
Responsiveness					
1. How would you rate the quality of our responses to your questions and concerns?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Please rate the timeliness of responses that you receive from our agency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Personnel					
1. How would you rate the knowledge level of your agent/broker?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. How would you rate the knowledge level of your account representative?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Please rate the professionalism of our staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Communication					
1. Please rate the accuracy and timeliness of the information your agent/broker provides.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. How well does your agent/broker inform you of new or changed legislation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. How effective are our methods of communication?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Understanding Your Needs					
1. How accurate are the market analyses we provide?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Please rate our ability to anticipate your needs and provide assistance proactively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. How would you rate our renewal preparation and RFP analysis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Products and Services

1. How well do the products and services we provide meet your objectives?

Value-added

1. Please rate the value-added services we provide.

2. How well do our value-added services help you meet your objectives?

Administrative Practices

1. Please rank the ease of working with us.

Overall Service

1. Overall, how would you rank the service you receive from us?

Performance Indicator

1. What should we improve on? Please be specific.

2. What do we do well? Please name specific people and/or functions.

Partnering and Commitment

1. What are the most important challenges facing your organization this year?

2. What trends do you see occurring in your industry?

3. How can we help you do your job better?

4. Who else in your organization should we interview?

5. Is this process valuable to you? How frequently should we conduct these interviews?

6. Please provide any additional comments.
