

VALUED CLIENT FEEDBACK FORM

To help us improve our business, please rate each statement below using the number system provided.

**Once completed, please return to:
PO Box 7053, Hutt Street, Adelaide, SA, 5000**

1	I strongly agree
2	I agree
3	I neither agree or disagree
4	I disagree
5	I strongly disagree

		1	2	3	4	5
Q1	Barker Meier's team members are always polite, friendly and available to take my calls.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q2	Barker Meier's team members are professional and knowledgeable. They listen to what I need and present me with solutions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q3	My insurance policy renewal documents were easy to follow and understand. I clearly understand what my policy covers me for.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q4	I was provided with a number of flexible payment options to pay my insurance. These options included a monthly payment option.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q5	Barker Meier are quick and efficient in what they do which includes keeping me updated on pending matters.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q6	Barker Meier provides good customer service.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q7	I would recommend Barker Meier to others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

When did you last visit Barker Meier's internet site (www.barkermeier.com.au)?

Never 1-3 months 4-6 months 6-9 months 9-12 months over 12 months

In a few words, describe your last experience with Barker Meier below:

Date of Last Experience ____/____/____ Name of Barker Meier Team Member _____

What improvement suggestions would you recommend?

Would you like us to contact you about your Barker Meier experience or for an insurance quote?

Please call me about my Barker Meier experience.

Please call me about an insurance quote. I am interested in the following insurance:
 Business Tradesman Franchise Home/Contents Strata Motor Vehicle Liability Other _____

Your Name: _____ Your Phone Number: _____

When is the best time for us to contact you? morning afternoon

Name of Person Completing This Form _____ Date ____ / ____ / ____

Your Address: _____

Your Barker Meier Client Code: _____

Barker Meier Thanks You For Your Valuable Feedback

Please return this form to the General Manager – PO Box 7053, Hutt Street, Adelaide, SA, 5000

Barker Meier respects your privacy. For details on our Privacy Policy, please visit our internet site (www.barkermeier.com.au) or contact us for a copy of our Privacy Policy Statement. If there is insufficient room on this form for your answers, please attach a separate piece of paper.