

PETIT BROOK VETERINARY CLINIC



CUSTOMER SURVEY

In order to help us provide increasingly superior service, we ask that you take a few moments to answer a few questions.

1. How did you first hear about us?

Longtime client Word of mouth Personal referral Phone book Website Other

2. If we offered a monthly payment wellness plan for your animal, would this be of interest to you?

Yes No

3. Are you aware of pet insurance and how it works?

Yes No

4. Please rate the following statements on a scale of 1-5 (1 = Low and 5 = High).

Note: Please add additional comments on the back.

a. You are available by phone when I need to speak with you.....	1	2	3	4	5
b. Your hours are convenient.....	1	2	3	4	5
c. You explain things clearly in a manner I can understand.....	1	2	3	4	5
d. You are on time for my appointments.....	1	2	3	4	5
e. You are truly concerned about my pet.....	1	2	3	4	5
f. You make me feel welcome in your office.....	1	2	3	4	5
g. Your staff is very courteous and helpful.....	1	2	3	4	5
h. I feel I receive good value for the fees charged.....	1	2	3	4	5
i. I would recommend your practice to friends.....	1	2	3	4	5

5. Where do you feel we need improvement?

6. If you were hesitant to have a procedure such as blood work or surgery. What is the main factor holding you back?

Finances Lack of information Scheduling Other_____

7. What information do you look for when bringing your pet in for a wellness visit?

8. What is the best way to communicate with you? (Circle one) Email Phone Mail Text

Name: _____ Contact Information: _____ Date: _____

In appreciation of your time and opinions we will be entering you into a drawing for a free 6 pack of Frontline Plus for your pet.

THANK YOU!!