

Dear Partner

Many thanks for your interest to sell our laser cutting systems. We would like to know a little bit more about you and your company, therefore we kindly ask you to fill out the following questionnaire as detailed as possible.

To save the completed document please go to File ➡ Print and select your PDF generator programme as printer. Please save the completed questionnaire on your PC and send it back via e-mail to ➡ sales@eurolaser.com

General informations about your company:

Company name:

Street:

Post box:

Country:

Zip code:

City:

Phone areacode:

Phone:

Internet:

Fax:

Email:

Contact Person:

Name:

Position:

Company size, age

Company established in year:

Number of employees:

Geographical area:

Which geographical area(s) do you work in (countries)?

Which areas are occasionally supported with lower priority?

Which areas are well supported?

Subsidiaries, dealers, distributors:

Do you have any subsidiaries, dealers, distributors?

☐

Yes

☐

No

If „Yes“, where?

Branches and products:

What kind of branch/industrial sector do you work in?

What kind of products do you offer there?

Which applications are parts of your protection domain (diversification)?

Processing of acrylic

%

Processing of wood / veneer

%

Processing of dieboards

%

Processing of technical textiles

%

Processing of membrane switches / foils

%

Do you offer any other Laser systems (competitive products)?

☐

Yes

☐

No

If „Yes“, from which manufacturer and where?

Sales:

Number of your salesmen:

How many orders are respectively planned for the near and mediate future?

This year:

Next year:

References:

Do you have any references with similar applications?

Show room:

Do you have a show room?

☐

Yes

☐

No

If „Yes“, how many people work there?

Do you have a demonstration system installed?

☐

Yes

☐

No

If „Yes“, from which manufacturer?

Exhibitions:

Are you planning to exhibit your/our products at any exhibition?

☐

Yes

☐

No

If „Yes“, at which exhibitions do you usually participate?

After-sales service:

Do you have a service-department / staff?

☐

Yes

☐

No

If yes, how many trained service technicians are available (possibility of double support)?

eurolaser:

Laser general:

Zünd:

Total number:

Invests:

Do you plan to invest in sales staff training at eurolaser?

☐

Yes

☐

No

Communication-language:

In what language would you like to communicate with us?

Spoken:

Written:

Current project:

Is a current application project the reason for you to contact us?

☐

Yes

☐

No

If yes, please give us a short description:

Comments / More ideas:

Thank you for your patience and efforts to fill out this questionnaire. In case of any questions, please do not hesitate to contact us.

