

Dear colleagues,

Basic goal of BQC is to provide reliable and impartial audit services to its customers by continuously improving the quality of provided services at all levels of its organization and operation. In order to achieve this, your opinion about the services and the overall image of BQC is particularly useful and necessary. For this purpose, we kindly ask you to fill in the following questionnaire and send it to us via fax, e-mail or post office.

Thank you for your time, your valuable cooperation and your contribution in the effort of BQC to become better.

Please answer the following questions and choose one (1) out of four (4) available options on how to characterize the following:	Very Good	Good	Average	Poor
1. Professional ability and sufficiency of auditors.				
2. Maintenance of audit programs and generally timelines and contractual obligations.				
3. Correspondence, response and resolution time of requests.				
4. Politeness and willing to service from auditors and staff.				
5. General behavior of auditors and staff.				
6. Pricing policy.				
7. Quality of service.				
8. Cooperation Benefits.				
9. Support after the provided service.				

Would you recommend BQC to others?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If NO, please elaborate:		

Are there any future needs you would like our support?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
If YES, please choose one or more of the following:				
ISO 9001 <input type="checkbox"/>	ISO 22000 <input type="checkbox"/>	HACCP <input type="checkbox"/>	ISO 14001 <input type="checkbox"/>	OHSAS 18001 <input type="checkbox"/>
GDP (MD 1348/04) <input type="checkbox"/>	ISO 13485 <input type="checkbox"/>	ISO 29990 <input type="checkbox"/>	ISO 27001 <input type="checkbox"/>	ISO 50001 <input type="checkbox"/>
Other <input type="checkbox"/> , please refer:				

Would you be interested to participate in our training courses?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If YES, please mention:		

Optionally fill in the following:

Company – Name – Position

Date of completion

Signature – Company Stamp