

Through this “Customer Survey”, we would particularly like to assess the quality of our services and analyze your needs to better give you satisfaction.

For this reason, we invite you to answer this questionnaire and we thank you in advance for your answers.

1. Indicate the type(s) of insurance contract(s) that you subscribed to and your level of satisfaction. State your reasons.

Types of contracts	VS*	S*	PS*	Your reasons
Vehicle				
Life (except death temporary) detail				
Group healthcare				
Lodging Multi-risks				
Professional Multi-risks				
Individual Accidents				
Theft				
Fire				
Civil Responsibility				
Transport				
Others:.....				

(*) Check the corresponding box (s)

VS: Very Satisfied

S : Satisfied - PS : Poorly Satisfied

Customers Survey Questionnaire

2. What are your general impressions about the service?

Very satisfied

Satisfied

Poorly satisfied – State your reason (s) :

.....

3- Do you have comment(s) to make concerning products offered by our company ? YES / NO

When YES, please indicate the type (s) of product (s) and the concerned level (price, service ...)

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4- Are you interested by an insurance contract

Life (additional retirement /Family annuity)

Healthcare / Hospitalization

School

Lodging multi-risk

Professional Multi-risk

Individual accidents

Others

When yes, please describe:

Observations and suggestions

.....
.....
.....
.....

First and Family Names:	Date of Birth
Civil Status	Number of Children
Address	Ages
.....	Phone
Occupation	Company
Address
.....
Phone:	Fax
.....	e-mail

Thank You for Your Cooperation !

You can send us the questionnaire by fax at 71.788.334 (to the attention of the Service Marketing)
by mail to the following address: MAGHREBIA INSURANCES, Service Marketing
64, rue de Palestine 1002 Tunis